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S AND COMMITTEE REPORTS



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**Report of the
United States Delegation to the
International Conference
for the Eighth Revision of the
International Classification
of Diseases**

Geneva, Switzerland - July 6-12, 1965

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HEALTH, EDUCATION, AND WELFARE
Public Health Service**



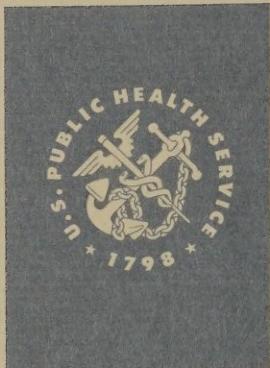
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VITAL and HEALTH STATISTICS

DOCUMENTS AND COMMITTEE REPORTS

**Report of the
United States Delegation to the
International Conference
for the Eighth Revision of the
International Classification
of Diseases**

Geneva, Switzerland - July 6-12, 1965

Discussion and recommendations at the Conference that was concerned primarily with Eighth Revision of the International Classification of Diseases and gave some consideration to multiple-cause tabulation and analysis and to hospital statistics.

Washington, D.C.

September 1966

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HEALTH, EDUCATION, AND WELFARE
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Secretary

Public Health Service
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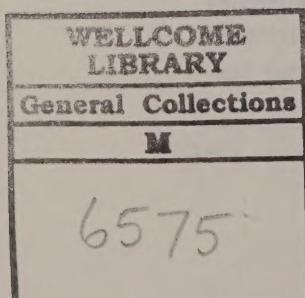
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*THIS IS A REPORT of the International Conference
for the Eighth Revision of the International Classifi-
cation of Diseases.*

*The revised classification represents an important
advance and, with some adaptations, it is expected to
meet the major needs for a disease classification in
the United States. The Conference recommended that
the World Health Organization publish the Eighth Re-
vision of the International Classification with an alpha-
abetic index early in 1967. The Eighth Revision is ex-
pected to go into effect on January 1, 1968.*

REPORT OF THE U.S. DELEGATION TO THE INTERNATIONAL CONFERENCE FOR THE EIGHTH REVISION OF THE ICD

BACKGROUND OF THE CONFERENCE

The International Conference for the Eighth Revision of the International Classification of Diseases (ICD) convened by the World Health Organization (WHO) met in the Palais des Nations, Geneva, from July 6-12, 1965. As is evident from the Conference title, its primary purpose was to agree on the Eighth Revision of the International Classification of Diseases and related matters. Discussion of other topics related to health statistics was also included on the agenda.

The efforts of countries to achieve some degree of standardization in the classification of disease and causes of death is perhaps one of the earliest efforts at international cooperation. The first International Statistical Congress, held at Brussels in 1853, requested Dr. William Farr (England) and Dr. Marc d'Espine (Switzerland) to prepare "une nomenclature uniforme des causes de décès applicable à tous les pays." The next Congress in 1855 adopted a nomenclature with this objective in mind, and this first list was revised in 1864, 1874, 1880, and 1886 in successive sessions of the Congress. By 1891 the International Statistical Institute, successor to the International Statistical Congress, had taken up the task of achieving international comparability in this field. Acceptance of the proposed classifications was slow, but in 1898 the general principles were endorsed by the American Public Health Association; and other countries had begun to use the internationally recommended concepts.

In 1900 the French Government convoked in Paris the first International Conference for

the revision of the Bertillon Classification of Causes of Death; and this Conference, attended by delegates from 26 countries, adopted the First International Classification. The French Government called conferences for the successive revisions of this Classification in 1909, 1920, 1929, and 1938. At the time of the 1929 and 1938 revisions, the International Statistical Institute and the Health Organization of the League of Nations were active in the technical aspects of mortality classification problems.

Because of the activity of the League of Nations in this work, the responsibility for the problem was embodied in Article 21 of the Constitution of the World Health Organization, which gives WHO the authority to adopt regulations concerning "...(b) nomenclature with respect to disease, causes of death and public health practices..."

Conferences for the revision of the ICD have been held under the auspices of WHO in 1948 and 1955 and now in 1965.

ORGANIZATION OF THE CONFERENCE

For the most part the Conference worked in plenary sessions, establishing only one major working group or committee. Delegates from Australia, the United Kingdom, and the United States and technical staff of the WHO Secretariat were in this important working group. The function of this committee was to examine the numerous detailed revision proposals that various countries submitted for consideration and to decide if the

proposals were minor or editorial in character or if they were important decisions calling for Conference action. The major proposals as identified by this committee were submitted to the full Conference (WHO/HS/8 Rev. Conf./10) and final decisions taken at plenary sessions.

It is notable that the attendance of the members of the delegations from the countries was extremely high throughout every session—the number of absences being unnoticeable. The discussions were of a strictly technical character with no introduction of extraneous issues or comments at any time. The Conference functioned with a high degree of goodwill and willingness to make technical compromises in order to reach a consensus. At no time was it necessary to take a formal vote, the Chairman being able to sense and express a generally acceptable conclusion after adequate expression of differing national viewpoints by the various delegations.

The final report of the Conference (WHO/HS/8 Rev. Conf./11.65) is given in Appendixes I, II, and III.

WORK OF THE CONFERENCE

Eighth Revision of the ICD

The Eighth Revision proposals were discussed on the assumption that the new Nomenclature Regulations would provide for obligatory use of the three-digit categories of the International Classification of Diseases and leave the use of the fourth-digit categories optional. It was recognized that national needs varied and that use of or form of fourth-digit subdivisions for national purposes would differ from country to country.

The Conference reviewed the proposals submitted section by section. The Chair entertained only comments of a substantive nature and referred all matters of an editorial nature to the Secretariat. These comments were later examined by a small working group established for this purpose. (For report see WHO/HS/8 Rev. Conf./10.)

By and large, the issues that were raised concerning the proposed revision were minor in nature and generally dealt with fourth-digit subdivisions. Most of the changes involving fourth-

digit categories were not seen as presenting particular problems in the United States. A possible exception is the deletion of the proposed fourth-digit subdivisions under diabetes mellitus that show various clinical manifestations and complications of the disease. It is expected that some adjustment will need to be made in the United States. The proposal for giving more prominence to the reactive psychoses would have caused difficulty, but the solution which was adopted should not cause any problems in the compilation of mental disease statistics in the United States.

At the conclusion of discussion of revision proposals, the WHO Secretariat raised a question about the status of fourth-digit subdivisions which indicated a divergence of views from those expressed by the Conference. The Conference confirmed the notion of national options with respect to fourth-digit categories but expressed the hope that fourth-digit categories provided in the International Classification of Diseases would be used by countries electing to go to the fourth-digit level of detail.

There was considerable concern expressed by several delegations such as Australia, Norway, Canada, the United Kingdom, and the United States that WHO would not be able to publish the Eighth Revision of the ICD with an alphabetic index in time for its use at the beginning of 1968. Accordingly it was recommended in fairly strong terms that WHO complete this task as early as possible in 1967. The availability of manuals early in 1967 is particularly important for countries like the United States that need to develop training material and organize training courses to be offered to coders in State health departments before January 1, 1968.

International Form of Medical Certificate of Cause of Death

Since no serious consideration had been given to changes in the basic concept of cause-of-death statistics, no substantive changes could be proposed on the medical certificate form.

The Conference stressed the importance of national studies of the completeness, reliability, and validity of diagnostic information reported on

death certificates and the need to improve the quality of medical certifications based on such evaluation studies.

Lists for Tabulation of Morbidity and Mortality Data

The topic concerned the development of short lists of selected diagnoses to be used for special tabulation purposes. WHO proposals suggested two selected lists of 150 and 300 titles.

The U.S. delegation took the position that the problems of developing short lists should be discussed at the Conference but that final endorsement of such lists should not be made since WHO proposals had not been available for study prior to the Conference.

The WHO proposed lists were not generally accepted by the Conference. Various discussants pointed out the need for lists with fewer numbers of titles. The U.S. delegation emphasized that the lists would be more generally useful if fewer titles were used for infectious diseases in order to expand the number of titles available for chronic diseases.

It was generally agreed that draft lists of 50 and 150 causes and an optional list of 250-300 causes should be prepared by WHO and circulated to countries for comment.

Nomenclature Regulations

There was an extended discussion of the Nomenclature Regulations and how they should be modified in relation to the revised ICD. The delegation from the United Kingdom was particularly concerned with this question and had submitted a note to the Conference stating modifications of the Regulations that were considered necessary concurrent with the adoption of the revised ICD. Revisions of the Regulations were essential to restore the right of countries to make reservations to changes in the ICD—such a right to make reservations apparently expires at the time of the prior revision.

The necessity for such changes in the Regulations was generally recognized and the proposals of the United Kingdom were supported by the U.S. delegation and the Conference in general.

Beyond this, it was also generally recognized that the Regulations were somewhat obsolete and unnecessarily detailed in various respects. The United States proposed that a thorough study be made of the Regulations preliminary to a general redrafting, and the Conference recommended that the Regulations be reexamined and revised Regulations be submitted to the World Health Assembly (WHA).

At the final session it was agreed that the report of the Conference would indicate the sequence of steps to be followed—namely, that draft Regulations would be circulated to countries for comment and that proposed new Regulations would then be redrafted on the basis of such comment prior to their circularization as WHA working documents.

Adaptation of the ICD for Diagnostic Index of Hospital Records

The importance of utilizing some form of the ICD for indexing diagnostic data on hospital records was recognized, especially with respect to its implications in terms of hospital morbidity statistics. There was no disagreement about the desirability of an adaptation. Although a number of countries had already made national adaptations of the ICD for diagnostic indexing purposes, it was suggested that more experience was needed before a satisfactory international adaptation could be made. Therefore, it was suggested that interested countries be encouraged to experiment with ways in which an adaptation could be made and that WHO keep in touch with these experiments so that the question of developing an international adaptation could be examined at some time in the future. On the other hand, there were those who felt that the proposed Eighth Revision provided an adequate framework of a classification suitable for hospital indexing in some countries.

Multiple-Cause Tabulation and Analysis

The item was introduced by the U.S. delegation with a paper outlining studies of multiple causes appearing on U.S. death certificates (WHO/HS/ICD/75.65). The U.S. delegate noted the in-

tention of the United States to prepare multiple-cause tabulations, the interest of other countries, and the need for development of coding rules and procedures. Although it is premature to seek to establish international regulations in this regard, the United States would welcome an expression of interest from other countries in cooperative approaches to the problems.

Interest in such studies was expressed by the delegates from Germany, Norway, and the United Kingdom. Several other countries are clearly in a position to participate. The Netherlands has been coding and tabulating multiple causes since 1961. Australia is about to begin studies.

The delegates from Norway, the United Kingdom, and the United States, as well as the WHO Secretariat, stressed continuing interest in tabulations based on a single condition selected as the underlying cause. Such tabulations are necessary for the study of trends and are based on conditions of a degree of severity sufficient to overcome some of the problems of diagnostic accuracy and completeness of reporting associated with conditions of lesser severity.

The delegate from Australia suggested that all diseases and conditions present at time of death be included in multiple-cause tabulations. It was felt that as long as the collection of multiple-cause data was based on information available on death certificates, those conditions existing coincidentally, that is, not contributing to death, should not be considered part of multiple-cause tabulations.

It was pointed out that the results of multiple-cause tabulations will vary greatly according to the form of the death certificate, the responsiveness of the medical certifiers to the possibilities introduced by the new procedure, and other factors (Denmark, Norway, Yugoslavia, U.S.S.R., Australia, and Finland). These problems will require considerable investigation. Nevertheless, after recognizing the problems and limitations of multiple-cause tabulations at the present time, it still seems necessary to maximize the use of information that is now recorded on certificates (United States).

Denmark and the U.S.S.R. expressed interest in undertaking multiple-cause tabulations on a limited scale—perhaps on only three or four diseases.

Two proposals for limited multiple-cause analysis were made. One, put forward by WHO Secretariat, provided a means for coding in a single column selected cause combinations now recognized as of special interest (WHO/HS/ICD/79.65). This proposal was not commented upon. The other, from Israel, proposed that a schedule of conditions of particular interest be set up. One or two of these conditions would be selected each year and special efforts would be made by all participating countries to assemble data on the diseases associated with the condition selected during the year (WHO/HS/ICD/77.65). Although some countries in favor of limited multiple-cause work (Denmark, U.S.S.R.) referred favorably to the Israeli proposal, no consideration was given to the problems evident in the requirement of the proposal that special efforts be made to obtain more complete certification of the selected diseases.

The Chair proposed that countries interested in development of multiple-cause statistics should make their interest known to the WHO Secretariat and that the Secretariat should take the initiative in stimulating discussions at the international level. This proposal had the agreement of the Conference.

The Role of WHO in Developing Health Statistics

This item and the topics discussed below were general topics grouped under the agenda topic of National and International Developments in Health Statistics. Very little of the Conference time was allotted to this group of topics since the principal purpose of the Conference related to the Eighth Revision of the ICD and associated questions.

The discussion of the role of WHO was based on a document prepared by a WHO consultant (WHO/HS/8 Rev. Conf./3.65) and comprised a general review of the area of activities of the WHO unit concerned with a critique of its effectiveness and program gaps. The ensuing discussion was rather discursive, although many delegations made comments, and consisted to a large degree of indications of areas of work in health statistics that could properly be included in the WHO program.

The Conference, in general, and the Secretariat seemed to accept the general appraisal of

the consultant's report and no specific action seemed appropriate.

Hospital Statistics

This topic was introduced by a member of the Canadian delegation who described the program of hospital statistics now being developed in Canada and by a U.S.S.R. paper on the development of hospital statistics in that country as related to automatic data processing methods. The U.S. delegation described briefly the new program of hospital statistics being started in the United States.

Hospital statistics may be used for planning purposes relating to the size and nature and financing of the hospital as a physical plant. They may also relate to illnesses treated in the hospital which might be of value for epidemiological purposes. With regard to the latter use, the questions are intimately bound up with the subject of the adaptation of the ICD for diagnostic indexing purposes; therefore much of that discussion applies here.

There was general recognition that this emergent area of health statistics would be of increasing importance in many countries of the world and that the field was still in a fluid state as far as the technical aspects of the program are concerned. Accordingly, WHO could make an important contribution at this time by completing material in the form of handbooks on methods and on standardization of definitions and concepts and by assisting in the clarification of concepts and objectives. Recommendations to this end had previously been made by the Expert Committee on Health Statistics in its Eighth Report. The Conference gave general support to these recommendations.

It was also agreed that it was desirable for the various countries that are developing hospital statistics to keep in close touch with each other so that problems affecting international comparability may be discussed.

Implications of Advances in Automatic Data Processing

This topic is obviously of major interest to a few countries advanced enough to be using electronic equipment in processing health data. In

spite of this there was widespread interest in the topic as presented in a paper prepared by the General Register Office of the United Kingdom. The U.S. delegation outlined current activities in the United States in computer usage in health fields. Recognizing the future importance of these methods, the Conference recommended that WHO act as a clearinghouse for information on the use of computers in health statistics.

National Committees on Vital and Health Statistics

The discussion on National Committees on Vital and Health Statistics was opened by the WHO Secretariat with a summary of the existence, activities, and so forth of such Committees in 47 nations and a description of French experience with a national coordinating committee for health statistics. The issue here, if one existed, was the role of WHO in relationship to such Committees, particularly in stimulating their formation and development and in appraising their activities.

Discussion by delegates from Australia, France, Yugoslavia, and the United States revealed different patterns of numbers, responsibility, and operations. Regardless of the pattern, there was general support of the U.S. point of view that such Committees should be: (1) National organizations, reporting to a national agency to be determined by the government concerned (and not international in a direct sense); (2) Advisory (not executive), serving in the capacity that best suits the needs of the government concerned, with full appreciation that advice may be accepted or rejected; (3) So characterized as to provide a representative national forum for the definition of problems of health statistics, stimulation of solutions by appropriate ad hoc subcommittees, and dissemination of information concerning their interests and activities.

There was no expression of need for activity on the part of WHO beyond response to national requests for assistance in formation of a committee on health statistics and collection and dissemination of information concerning their use and accomplishments. It is a fair conclusion to assume that those nations functioning by democratic processes use national advisory committees on health statistics in a variety of ways

(coordination, policy formulation, education, technical development, evaluation), depending on national need and desire, and generally find them useful instruments in their national health statistics programs.

FUTURE MEETINGS

No decisions were made or discussed in a formal way regarding future international conferences dealing with the questions of this Conference. However, it was assumed throughout the meeting that in 1975 or earlier there would be a Ninth Revision Conference, and many points were made regarding additional steps that could be taken to achieve greater international comparability of mortality and morbidity statistics by that time. It was also assumed that prior to the Ninth Revision Conference there would be a long program of national, bilateral, and multilateral studies and consultations and various WHO Expert Committee activities preparatory to the next revision. This would follow the established pattern of previous revisions.

CONCLUSIONS

In preparing for the Eighth Revision of the International Classification of Diseases begun in 1959 in the United States, the various broad needs for a disease classification were recognized. From the outset, the United States pressed for a disease classification suitable for indexing hospital diagnoses and for hospital morbidity statistics in addition to the traditional uses of the ICD for classifying causes of death. This view was not shared by many countries which were preoccupied with the need for obtaining more information on causes of death by providing in the body of the International Classification of Diseases categories dealing with combinations of various diseases. This approach to the classification of causes of death was criticized by Dorn¹ as an inflexible and otherwise unsatisfactory method for producing cause-of-death statistics.

¹Dorn, H. F.: Some considerations in the revision of the International Statistical Classification, *Pub. Health Rep.* 78:175-179, Feb. 1964.

Furthermore, the introduction of various combinations of diseases into the disease classification interferes with the use of the classification for coding multiple diagnoses as needed in classifying morbidity data and for securing maximum use of diagnostic information reported on death certificates.

The preliminary draft classifications were generally unsatisfactory from the U.S. point of view. After successive modifications, the disease classification finally adopted by the Conference provides a generally satisfactory structure for use in the United States. With certain adaptations with respect to the details of the classification as provided for by the Conference agreement, it is expected that the major needs for a disease classification in the United States will be satisfied.

The revised classification represents an important advance over the previous revision of the International Classification of Diseases. The proposed section on mental disorders is more closely aligned with the views of American psychiatry. Greater recognition is given to dental conditions and to congenital anomalies that are of interest in genetic studies of the human population. The classification of nature of injury, especially adverse effects of drugs, has been updated to meet needs of hospitals. The revision proposed by the Conference goes a long way to meet increased demands in the United States during the coming decade for a suitable disease classification for various purposes.

The structure of the classification provides a satisfactory basic framework for adaptations for various purposes. The U.S. delegation is of the view that the option on fourth-digit categories should be exercised and study given to the preparation of an adaptation of the ICD for hospital indexing and for hospital morbidity statistics in the United States. It would be important and extremely desirable if a single adaptation would serve all the official needs for a disease classification in the United States.

The U.S. delegation suggested that a full-scale multiple-cause coding and tabulation program be undertaken in the United States on a regular basis after a study is made of methodological problems involved in coding and tabulating multiple diagnoses reported on death certificates.

In view of the interest expressed by several countries in preparing multiple-cause tabulations, it was also suggested that the United States collaborate with interested countries with the view to establishing comparable procedures and minimum tabulation specifications of associated diseases for comparative purposes.

It is expected that during the decade that the Eighth Revision of the ICD will be in effect extensive use will be made of the classification for morbidity statistics. This experience will be invaluable for the next revision. However, more opportunity should be given to study revision proposals than was provided for the Eighth Revision. National and international work on the Ninth Revision of the International Classification of Diseases should be started as early as possible. In this connection, consideration should be given to reexamination of the concept of the underlying cause of death as well as to the kind of multiple-cause data that should be collected. In preparation for the Ninth Revision, it is suggested that where possible studies be undertaken by the United States in collaboration with one or more other countries.

With regard to other items discussed by the Conference, the U.S. delegation generally endorses the views expressed. In most instances, the U.S. delegation would have preferred stronger, positive, and more far-reaching recommendations on the various questions under discussion. For example, the question of definition of the perinatal period is an important one from the standpoint of producing perinatal morbidity and mortality statistics. For the purpose of assessing perinatal and infant mortality statistics, it is necessary to go further in determining actual reporting

practices of attendants at birth as well as registration and statistical practices. Studies of definitions actually used as well as completeness of perinatal death registration are essential for assessment of the level of infant mortality rates in developed countries. In other areas of mortality statistics, it is important that studies be made of the validity, reliability, and completeness of diagnostic data reported on medical certification of causes of death. This is particularly true for time-trend comparisons of national multiple-cause information or international comparisons of multiple-cause data. Although international recommendations on these points did not emerge from the Conference, the U.S. delegation notes the essential nature of these evaluative studies in the United States.

The question of use of electronic computers is an academic one for many countries represented at the Conference. For countries such as the United States, the United Kingdom, and Canada, the problem is a practical one. In fact, the feasibility of conducting large-scale statistical programs in hospital morbidity and on multiple causes of death depends to some extent on the future development of procedures for encoding of diagnostic information by use of computers. This is in areas where important developments may be expected. The U.S. delegation noted with interest the efforts devoted to this problem and expressed the hope that international collaboration will be possible on a bilateral or multilateral basis. A coordinated attack on this problem is essential if satisfactory computer encoding procedures are to be developed before 1968.



APPENDIX I

REPORT OF THE CONFERENCE

The International Conference for the Eighth Revision of the International Classification of Diseases convened by the World Health Organization met in the Palais des Nations, Geneva, from 6 to 12 July 1965. The Conference was attended by the following 36 Member States and one Associate Member:

Australia	Norway
Austria	Poland
Bulgaria	Portugal
Canada	Romania
Czechoslovakia	Saudi Arabia
Denmark	Spain
Finland	Sweden
France	Switzerland
Federal Republic of Germany	Thailand
Ghana	Togo
Guatemala	Union of Soviet Socialist Republics
Hungary	United Kingdom of Great Britain and Northern Ireland
India	United States of America
Iran	Venezuela
Israel	Yugoslavia
Italy	Mauritius, Associate Member
Japan	
Kuwait	
Madagascar	
Mali	
Netherlands	

The United Nations Organization and the International Labour Organisation as well as three international non-government organizations, namely, the International League of Dermatological Societies, the International Society of Cardiology and the International Union against Cancer, sent representatives to participate in the Conference. The list of participants is attached as Appendix II to this report.

Dr. P. D. Dorolle, Deputy Director-General of the World Health Organization, opened the Conference on behalf of the Director-General. It was agreed that the sessions be public and that the Rules of Procedure for Expert Committees, except Article 3, and Articles

43, 44 and 45 of the Rules of Procedure of the Executive Board apply for the conduct of the sessions.

The Conference elected the following officers:

Chairman:	Mr. M. Reed Registrar General for England and Wales, General Register Office United Kingdom of Great Britain and Northern Ireland
Vice-Chairmen:	Dr. F. E. Linder Director National Center for Health Statistics United States of America
	Dr. V. K. Ovčarov Chief Health Statistics Department of the Semashko Institute of Health Administration and History of Medicine Union of Soviet Socialist Republics
	Dr. D. Curiel formerly Medical Chief Division of Epidemiology and Vital Statistics Ministry of Health Venezuela
Rapporteurs:	Dr. M. J. Aubenque Chef Division des Statistiques sanitaires Institut national de la Statistique et des Etudes économiques France
	Dr. R. H. C. Wells First Assistant Director-General Commonwealth Department of Health Australia

The Conference adopted the agenda¹ which, apart from the Eighth Revision of the International Classifi-

¹WHO/HIS/8 Rev.Conf./7.65

cation of Diseases and matters related to it, included other items reflecting national and international developments in the field of health statistics.

1. EIGHTH REVISION OF THE INTERNATIONAL CLASSIFICATION OF DISEASES (ICD)

1.1 General structure of the Classification

Before reviewing the revision proposals for the various sections of the Classification, the Conference considered some of its more general aspects.

1.1.1 Numbering system of the Classification

The Conference recalled the comments of the Expert Committee on Health Statistics in its Ninth Report² on the numbering system of the Classification and endorsed the view that the three-digit categories should form "the basic framework of the ICD in all its varied applications." In regard to the fourth digit, the Expert Committee had said:

"The role of the fourth digit was the identification of greater detail within the three-digit categories. The extent of the detail needed would vary for different applications of the ICD; greater, for example, in diagnostic indexing and special studies than in routine statistical use. Furthermore, the fourth-digit detail required in the various sections of the Classification would differ in different countries or regions. The ICD, therefore, should include the essential and desirable fourth-digit sub-divisions but countries should be free to use them or not or even to prepare their own fourth-digit adaptations instead. The Committee considered, however, that the internationally recommended four-digit structure would be suitable for most purposes and that countries would only rarely need to depart from it. Any departure from the fourth digits of the ICD must be clearly identified as such and must not affect the contents of the three-digit categories concerned."

The Conference appreciated the need for flexibility at the level of the fourth digit, though it was clear that in some sections, e.g. the perinatal section, meaningful statistics would require four-digit coding, but was concerned that the option to vary the fourth-digit breakdown should not be used more than is necessary. The Conference considered that this option need be exercised only in exceptional circumstances, when the internationally recommended fourth digits were inappropriate for national purposes and could not be expanded with suitable additional fourth-digit categories. Subject to this comment, the Conference en-

dorsed the views of the Expert Committee on this subject.

It was also agreed that when it was appropriate and possible to include separate sub-categories for "Other" and "Unspecified," they should be numbered consistently .8 and .9.

1.1.2 Classification of symptoms

The Conference agreed on the continuing need for a special section of the ICD for the classification of symptoms which do not point definitely to a given diagnosis and cannot therefore be assigned to a category in the disease sections of the code. It was appreciated that a final revision of this section would require a systematic review of all terms in the present alphabetical index in relation to this criterion.

1.1.3 Notes under ICD categories

The Conference requested WHO to review the notes defining the content of categories with a view to making them more immediately intelligible to coders and to persons using the Classification for the purpose of interpreting published statistics.

1.1.4 Supplementary classifications

The Conference reviewed the functions of the supplementary (Y) classifications. That for causes of stillbirth would now disappear since it was integrated into Section XV, "Certain causes of perinatal morbidity and mortality." The categories Y00-Y29 were regarded as essential to provide a full count of admissions to hospital, attendances at out-patient clinics, etc. in respect of persons who were not sick and who could not, therefore, be classified to the main code. The Conference accordingly considered that this classification, suitably revised, should appear in the Manual of the ICD.

The classification of impairments in categories Y40-Y88 was seen as a parallel code, collecting in one group a number of conditions scattered throughout the main code. It had been used by some countries in health surveys and the Conference, appreciating that such surveys were likely to increase, considered that it would be useful if such a classification appeared in the Manual of the ICD for optional use.

1.2 Categories and sub-categories of the ICD

The Conference considered the recommendations in the ninth report of the Expert Committee on Health Statistics (WHO/HS/ICD/74.65) and the revision proposals annexed to it (WHO/HS/ICD/74.65 Add.1-17), which were the outcome of two meetings of the Sub-Committee on Classification of Diseases and of com-

²WHO/HS/ICD/74.65

ments from countries. The Conference established a working group to examine national amendments submitted during the Conference.

Adopting, with a few modifications, the report of the working group (WHO/HS/8 Rev. Conf./10.65), amending the revision proposals in WHO/HS/ICD/74.65 Add.1-17, the Conference

RECOMMENDS that the revised Detailed List of Categories and Sub-Categories shown in Appendix III constitute the Eighth Revision of the International Classification of Diseases.

1.3 Editing of Manual

The Conference recognized that certain inconsistencies may come to light during the process of editing, especially in preparing the list of inclusions, and agreed that the Secretariat effect the necessary corrections.

2. RELATED MATTERS

2.1 International Form of Medical Certificate of cause of death

The Conference noted that the Expert Committee on Health Statistics and its Sub-Committee did not propose any change of substance in the International Form. While endorsing this view the Conference discussed the value of some editorial changes which appeared useful from the experience of some countries. It was also stressed that explicit definitions should be given in the Manual of the ICD for the items contained in the medical certificate. Attention was called to the need for additional questions outside the medical certificate of cause of death to obtain information on the type and circumstances of violent deaths which would allow proper classification in the External-cause Section.

The Conference having considered the views expressed on the medical certificate of cause of death

RECOMMENDS that no change of substance be introduced in the International Form of Medical Certificate of Cause of Death; that the International Form be reviewed in respect of editorial improvement; and that explicit definitions be given in the Manual of the items in the Medical Certificate of Cause of Death. Further RECOMMENDS that countries who have not already done so make provisions in the death certificate for obtaining information on the type and circumstances of violent deaths.

The Conference also discussed the variations bound to exist in stating the cause of death in respect of completeness, accuracy and reporting habits. It noted with satisfaction the studies made or being made on the national and international level and considered it desirable that such studies be undertaken with a view to increasing the reliability of the basic data and to improve medical certification of cause of death.

2.2 Lists for tabulation of morbidity and mortality data

The Conference reviewed the lists of 100 and 300 titles submitted to the Conference³ which had been drawn up in accordance with a recommendation of the Sub-Committee on Classification of Diseases.⁴ Concern was expressed that these lists were too long for the convenient publication of statistics, especially when cross-classified with sex and age or other factors. The Conference considered that lists of the present length of 50 and 150 titles were sufficient for the purposes required by the WHO Nomenclature Regulations:

RECOMMENDS that WHO revise the Intermediate List of 150 Causes and the Abbreviated List of 50 Causes and circulate them to countries for comment before deciding their final form and including them in the Manual.

The Conference considered that a longer list, of 250 to 300 titles, might well be included in the Manual for optional use.

2.3 WHO Nomenclature Regulations

The Conference considered and supported a proposal⁵ for amending the Nomenclature Regulations to enable countries to review and restate their positions on these Regulations following each revision of the ICD. It was recognized that the adoption of the Eighth ICD Revision would necessitate consequential amendments to some of the articles of the Nomenclature Regulations and that, in particular, Articles 1 and 20 of the present Regulations did not provide in a simple manner for periodical revisions of the ICD. It was suggested that the Regulations should be simplified by removing technical details concerning items such as age groupings from the basic articles and by listing them separately elsewhere within the Regulations. The Conference further noted that some of the articles, such as Article 11 referring to the confidential nature of medical information given on death certificates, made mandatory international obligations on matters which are of solely national concern.

The Conference therefore

RECOMMENDS that WHO re-examine the Nomenclature Regulations taking into account the above comments, and any further proposals put forward by Member countries, and prepare revised draft regulations for submission to the World Health Assembly.

The Conference was informed that Member countries would be given an opportunity to examine and comment upon a preliminary draft of the revised Regulations before preparation in a final form for submission to the World Health Assembly.

³WHO/HS/ICD/78.65

⁴WHO/HS/ICD/22 & 50

⁵WHO/HS/ICD/76.65

2.4 Adaptation of the ICD for diagnostic indexing of hospital records

The Conference noted that the current ICD had been adapted by a number of countries for the purposes of diagnostic indexing, and that these adaptations had been welcomed and widely used in hospitals. There was no doubt that interest in this use of the ICD was both strong and growing. At least one of these adaptations, however, had found it necessary to depart from the three-digit structure of the ICD, and this had led to some confusion in coding.

The Expert Committee on Health Statistics in its ninth report⁶ had recommended that WHO should prepare such an adaptation on the basis of the eighth revision of the ICD, using the three-digit categories as the framework. The view was expressed to the Conference that in some countries the same personnel handled records from many sources and that for them there would be some advantage if the fourth digits for coding and for indexing conformed as closely as possible.

The Conference noted that the Eighth Revision of the ICD had been constructed with hospital indexing needs in mind and considered that the revised classification would be suitable in itself for hospital use in some countries. However, it was recognized that the basic Classification may provide inadequate detail for diagnostic indexing in other countries.

The Conference, therefore,

RECOMMENDS that WHO, taking into consideration the increased specificity required, prepare an adaptation of the revised classification more widely applicable for hospital indexing.

An essential complement to a diagnostic index is a code of operations and procedures. Examples of such a code had been prepared by several countries and the Sub-Committee on Classification of Diseases in its first report⁷ recommended that WHO should take steps towards developing a similar code for international use. The Conference suggested that one of the national codes should be circulated by WHO and the comments received used as the basis for an international code.

2.5 Multiple-cause tabulation and analysis

Papers were presented to the Conference on the need for and problems concerned in full-scale multiple-cause analysis⁸ and on the possibilities of more modest approaches.^{9,10} The Conference, although recognizing the importance of the underlying cause of death for the presentation of historical series, appreciated the need

to supplement single-cause statistics by total counts of conditions reported on the medical certificate of cause of death and, more importantly, by the demonstration of syndromes of associated conditions leading to death.

The Conference, noting that several countries had either started or were about to start multiple cause tabulations,

RECOMMENDS that interested countries inform WHO of their plans for introducing multiple cause analysis and that WHO act as the co-ordinating body for international collaboration in developing uniform rules and procedures for coding and tabulation.

The Conference considered that the value of a more limited approach should not be overlooked. This might take the form of a thorough analysis of one or two different diseases each year¹¹ or the continuous routine identification of a small number of associations.¹²

The Conference stressed that the value of multiple cause analysis depended on the completeness of the entries on the medical certificate of cause of death in respect of the "syndrome of cause of death" and contributory causes. In order to obtain the full value of multiple cause analysis certifiers need advance instruction on how to complete the certificate for this purpose.

Multiple tabulation of causes of death should be supplemented by the study of associations of diseases through multiple tabulations of morbidity data.

2.6 Rules for selection of cause of death

Application of the rules of selection, and particularly comparisons of their use in different coding offices, had shown the need for some clarification and, if possible, simplification in order to reduce the possibility of differences in interpretation as stressed by the Sub-Committee on Classification of Diseases.¹³ Noting the experience acquired in comparisons of coding conducted by the WHO Centres for Classification of Diseases and by Regional Offices of WHO, the Conference

RECOMMENDS that WHO revise the Rules for selection of cause of death, seeking advice from the WHO Centre and the Latin-American Centre for Classification of Diseases, from WHO Regional Offices with experience in this matter, and from other competent sources.

2.7 Definitions and other issues relating to perinatal morbidity and mortality

2.7.1 Definition of foetal death

The Conference recognized the difficulties encountered in many countries in the practical application

⁶WHO/HS/ICD/74.65

⁷WHO/HS/ICD/22

⁸WHO/HS/ICD/75.65

⁹WHO/HS/ICD/77.65

¹⁰WHO/HS/ICD/79.65

¹¹WHO/HS/ICD/77.65

¹²WHO/HS/ICD/79.65

¹³WHO/HS/ICD/22

of the criteria of "evidence of life" in the WHO definition of foetal death as had already been pointed out by the Sub-Committee on Classification of Diseases.¹⁴ It was impossible to ensure that all birth attendants did in fact strictly apply the definition, but these criteria were intended as a guide to them in their decision as to whether a child was born alive or dead. Taking also into account the scant response from countries in respect of a change, the Conference did not see any useful purpose in amending the definition.

2.7.2 Definition of the perinatal period

The Conference endorsed the definition of the perinatal period proposed by the Sub-Committee on Classification of Diseases in its second report¹⁵ as extending from the 28th week of gestation to the seventh day of life. While agreeing that these were practical limits for international purposes, the Conference noted that some countries extended the collection of pertinent data down to the 20th week of gestation and up to the 28th day of life, preparing tabulations for both the restricted and the wider period. The Conference considered that such extensions should be encouraged, since their effect was to improve coverage of registration concerning the restricted period by removing the temptation to underestimate the duration of pregnancy at and around the 28th week in order to avoid the inconvenience of registering the birth.

In respect of tabulations concerning the perinatal period, the Conference urged the collection of data on the period of gestation, birth-weight, parity and other relevant factors and their cross-tabulation by cause of death.

2.7.3 Recording of causes of perinatal death

The Conference endorsed the view of the Sub-Committee on Classification of Diseases, expressed in its second report,¹⁶ that medical certificates of cause of foetal death should be in the same sequential arrangement as the normal death certificate. This arrangement allowed the certifier to indicate his opinion on the relationship between causes in the foetus and causes in the mother, and was for this reason preferable to the independent recording of foetal and maternal conditions.

Information on maternal conditions was also needed for the neonatal deaths included in the perinatal period. The Conference urged that where a certificate common to the whole perinatal period was not in use, countries should make provisions for the recording of details of causes in the mother on whatever form of certificate was in use for the neonatal deaths.

2.7.4 Recording of other data pertinent to the perinatal period

The Conference agreed with the list of items regarded by the Sub-Committee on Classification of Diseases in its first report¹⁷ as the minimum of information required for a proper analysis of perinatal mortality; cause of death, time of death (ante-, intra-, or post-partum), sex, maternal age, plurality, birth order or parity, attendant at birth, place of birth, duration of pregnancy in weeks, birth-weight.

This type of information was easier to secure in respect of foetal deaths, but was equally necessary for the neonatal component of perinatal mortality. The Conference noted that some countries used a common form of certificate for the whole perinatal period and, while regarding this as a useful solution to the problem of securing comparable information on the foetal and neonatal components, appreciated the difficulties attending its introduction in other countries. In some countries, the information was available on the birth record and a process of record-matching could be used to relate it to the death. The Conference did not recommend any particular solution, but stressed the importance of securing the data by one method or another.

2.8 Publication of revised Manual

The Conference noted that the Eighth Revision of the ICD was intended to come into use on 1 January 1968, and recognized the large amount of work involved in incorporating the revision changes, editing and producing the volumes of the Manual in several languages. However, the Conference considered it essential that the revised Manual be issued in 1967 so that countries could take all necessary steps for introducing the Eighth Revision into national practice by the beginning of 1968, including compilation of national adaptations in languages other than the official versions.

The Conference accordingly

RECOMMENDS that WHO should issue the revised Manual as early as possible during 1967.

The Conference suggested that consideration should be given to the inclusion in the Manual of the ICD of the "Classification of Industrial Accidents According to Agency"¹⁸ prepared by the International Labour Office, for use by countries which wished to supplement the ICD code of external causes.

The Conference was informed that plans were under consideration for publishing the Manual in Russian as one of the official languages in addition to the versions in English, French and Spanish.

¹⁷WHO/HS/ICD/22

¹⁸Annex B to Resolution concerning statistics of employment injuries, adopted by the Tenth International Conference of Labour Statisticians. International Labour Organisation, *Official Bulletin*, Vol. XL VI, No. 1, January 1968.

3. NATIONAL AND INTERNATIONAL DEVELOPMENTS IN HEALTH STATISTICS

3.1 Role of WHO in developing health statistics

The paper presented to the Conference¹⁹ made a critical assessment of the health statistics available to health administrations. The scope of the subject needed to be extended beyond the traditional emphasis on mortality statistics to include statistics on morbidity, demography, anthropology and operational aspects of health services. Too often the same routine statistics were produced year after year with little relevance to current problems. In developing countries there was an urgent need to devise means of preparing health statistics useful to administrators in the absence of a sophisticated system of health statistical services.

The Conference recognized the authoritative role played by WHO in regard to mortality statistics; in future the Organization should seek to establish a similar position in the wider field of health statistics as defined above. That WHO was aware of the problem was evidenced by conference held recently by the WHO Regional Office for Europe on the adjustment of statistical activities to consumer needs. Encouragement should be given to the development of flexible and experimental methods, e.g., *ad hoc* surveys and sampling techniques, to investigate particular problems and to supplement the broadly descriptive picture provided by routine statistics. The needs of the developing countries should be given priority by WHO; among their most pressing requirements were manuals for the training of personnel. The emphasis should be on methods of providing sound internal statistics, having in mind the desirability of promoting international comparability as progress was made.

The Conference expressed its appreciation of the value of the work of WHO in the field of health statistics and its encouragement to the Organization to expand its activities on the lines indicated in the discussion.

3.2 Hospital statistics

The Conference took account of the growing expansion of hospital statistics programmes and noted with satisfaction the attention given to this field in developing countries under WHO projects.²⁰ Papers were presented on systems in two countries²¹ using computer techniques to correlate data reported on hospital facilities and services and to obtain a series of detailed and useful indicators on the utilization of hospital resources. Similar techniques were being applied to the processing of morbidity and other data reported on discharged patients, allowing detailed presentation

of patients according to diagnosis, length of stay, type of care given and other factors of interest.

Considering the fast developments in hospital statistics programmes, the Conference supported the recommendation of the Expert Committee on Health Statistics in its eighth report²² that WHO prepare manuals to guide countries in the compilation of hospital statistics. Attention was called to the need for definitions of a number of items such as hospital bed, in-patient, admission, diagnosis for primary tabulation and for measures of utilization of hospital facilities. It was recognized that standardization of statistical reporting forms and procedures would take some time but efforts should be made by WHO towards this objective by continuing the collection of information on practices in various countries and by suggesting standards in the light of national experience.

3.3 Implications of advances in automatic data processing

In the paper presented to the Conference,²³ the most important effect of automation on the use of the ICD was seen as the great increase in utilization of hospital statistics which it made possible. This might well result in the replacement of mortality by morbidity coding as the prime application of the ICD. Other uses of electronic computers in connexion with the Classification were the much greater ease of performing multiple-cause analyses and, eventually, the automatic coding of entries on records of vital events. If the latter were ever to be adopted, a considerable simplification of the coding rules would be required, though this would be compensated by a more thorough analysis of contributory causes.

The Conference noted the interest in this subject already shown by WHO in the organization of conferences and symposia, particularly in the WHO European Region, and recognized the need for a regular interchange of information in a field where rapid technical progress was being made.

Accordingly, the Conference

RECOMMENDS that WHO act as a clearing house for the exchange of information on the use of computers in health statistics, requesting details on current national developments and disseminating the information in a new document series devoted to this subject, and stimulating discussion of computer topics at meetings of appropriate bodies.

3.4 National Committees on Vital and Health Statistics

Two papers were submitted to the Conference on this subject²⁴ and several delegates to the Conference

¹⁹WHO/HS/8 Rev.Conf./3.65

²⁰WHO/HS/8 Rev.Conf./4.65

²¹WHO/HS/8 Rev.Conf./1.65 and 8.65

²²Wld. Hlth. Org. Techn. Rep. Ser., 1963, 261

²³WHO/HS/8 Rev.Conf./5.65

²⁴WHO/HS/8 Rev.Conf./2 and 8.65

reported on the experiences of their countries with National Committees on Vital and Health Statistics. It appeared, as at similar previous occasions, that in certain countries national committees or their equivalents proved an effective means for co-ordinating activities in vital and health statistics, dealing with problems of common interest to the agencies con-

cerned, and for contributing to studies of international value. The Conference appreciated the work being done by WHO in promoting the establishment of national committees, in stimulating their efforts, in providing for an exchange of detailed information about the activities in other countries and in distributing material of a technical nature.

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APPENDIX II

LIST OF PARTICIPANTS AT THE CONFERENCE

Australia	Mr. L. G. Hopkins Director Demographic and Social Statistics Section Commonwealth Bureau of Census and Statistics Canberra	Dr. P. Parrot Demographer Quebec Ministry of Health Quebec, P.Q.
	Dr. R. H. C. Wells (Rapporteur) First Assistant Director-General Commonwealth Department of Health Canberra	Dr. A. H. Sellers Director Medical Statistics Branch Ontario Department of Health Toronto, Ont.
Austria	Dr. H. Hansluwka Chief Division of Population and Health Statistics Central Office of Statistics Vienna	Mr. V. Dolejsi Chief Health Statistics Section Ministry of Health Prague
	Professor L. Popper Head Fifth Department of Internal Medicine Wilhelminenspital Vienna	Miss I. Alsing Chief Medical Statistics Section National Health Service Copenhagen
Bulgaria	Dr. T. Pascalev Professor at the Institute of Medical Specialization and Higher Studies Sofia	Dr. J. Mosbech Medical Adviser Medical Statistics Section National Health Service Copenhagen
Canada	Mr. F. Harris Director Health and Welfare Division Dominion Bureau of Statistics Ottawa	Finland
	Dr. B. D. B. Layton Principal Medical Officer International Health Department of National Health and Welfare Ottawa	Dr. A. Isotalo Chief Physician National Board of Health Helsinki
		Miss A. Korpela Statistician Central Office of Statistics Helsinki
		France
		Dr. M. J. Aubenque (Rapporteur) Chef Division des Statistiques sanitaires Institut national de la Statistique et des Etudes économiques Paris

Dr. J. Fonroget Directeur général adjoint Ministère de la Santé publique Paris	Ghana	Dr. R. Leutner Medical Statistician Public Health Section Federal Office of Statistics Wiesbaden
Dr. X. Gelle Médecin Statisticien Bureau des Statistiques Institut national de la Santé et de la Recherche médicale Paris	Guatemala	Dr. K. Saakwa-Mante Chief Biostatistics Unit Ministry of Health Accra
Dr. M. Guidevaux Maitre de Recherche Institut national de la Santé et de la Recherche médicale Paris	Hungary	Professor F. J. Aguilar Director-General of Public Health Guatemala City
Dr. J. P. Jardel Médecin-Assistant Section des Statistiques de Santé publique Ecole nationale de la Santé publique Rennes	India	Dr. Z. Marton Chief Department of Health Statistics Central Office of Statistics Budapest
Dr. R. Sadoun Chef Section de la Santé mentale et Psychiatrie Institut national de la Santé et de la Recherche médicale Paris	Iran	Dr. K. C. Patnaik Director Central Bureau of Health Intelligence New Delhi
Dr. H. E. Ehrhardt Professor of Forensic and Social Psychiatry University of Marburg	Israel	Dr. A. Diba Technical Adviser on WHO Affairs Permanent Delegation of Iran to the International Organizations Geneva
Dr. J. Haller Lecturer and Research Assistant Department of Obstetrics and Gynaecology University of Goettingen	Italy	Dr. G. Kallner Medical Adviser to the Government Statistician Central Bureau of Statistics Jerusalem
Dr. H. R. Immich Medical Officer Department of Statistics German Cancer Research Centre Heidelberg	Japan	Dr. P. Morganti Chief Causes of Death Section Division of Health Statistics Central Institute of Statistics Rome
Dr. S. Koller Institute for Medical Statistics and Documentation University of Mainz		Dr. R. Nakahara Director Division of Health and Welfare Statistics Ministry of Health and Welfare Tokyo

	Mr. N. Takizawa First Secretary Permanent Delegation of Japan to the International Organizations Geneva	Dr. B. V. Bekker Chief Bureau of Epidemiology and Analysis Department of Chief Medical Officer The Hague	
Kuwait	Dr. S. Watanabe Adviser Division of Health and Welfare Statistics Ministry of Health and Welfare Tokyo	Dr. M. J. W. de Groot Chief Division of Health Statistics Central Bureau of Statistics The Hague	
	Mr. A. A. Al-Mou'nes Statistician Ministry of Public Health Kuwait	Dr. V. M. Oppers Chief Division of Health Statistics Municipality of Amsterdam Amsterdam	
	Dr. M. A. A. Abdul Salam Chief Tuberculosis Control Department Ministry of Public Health Kuwait	Dr. P. J. van der Schaar Head Psychiatric Clinic Dijkzigt Hospital Rotterdam	
Madagascar	Mme. A. M. Raoely-James Chef Division des Etudes, Analyses et Recherches Institut national de la Statistique et de la Recherche économique Tananarive	Dr. A. van Vianen Health Council of the Netherlands The Hague	
Mali	Dr. J. J. Leveuf Conseiller technique Direction générale de la Santé Ministère de la Santé publique et des Affaires sociales Koulouba	Norway	Mrs. E. Blix Statistician Central Bureau of Statistics Oslo
	Mr. N. Fomba Ministère de la Santé publique et des Affaires sociales Koulouba	Poland	Dr. L. Linneberg Chief Medical Adviser National Social Insurance Administration Oslo
Mauritius	Mr. J. Y. Nadeau Registrar of Health Statistics Ministry of Health Port Louis	Portugal	Dr. K. Westlund Head Institute of Biostatistics Oslo Municipal Hospital
Netherlands	Dr. A. C. Arntzenius Head Department of Cardiology Out-Patient Service University Hospital Leiden	Portugal	Dr. Z. Branowitz Director Department of Medical Statistics Ministry of Health and Social Insurance Warsaw
			Dr. A. F. Gama Freire Medical Statistician Hospital do Ultramar Lisbon

	Dr. L. A. C. R. Cayolla da Motta Medical Officer Directorate General of Public Health Lisbon	Thailand	Dr. B. Subhamani Director Statistical Services Ministry of Public Health Bangkok
Romania	Dr. J. C. de Sousa vaz Vieira Chief of Division National Institute of Statistics Lisbon		Dr. S. Terayanont Medical Officer Section of Hospital Statistics Department of Medical Services Ministry of Public Health Bangkok
Saudi Arabia	Dr. G. Jelezov Director Division of Planning and Statistics Ministry of Health Bucharest		Dr. F. Vongsfak Statistician Division of Vital Statistics Ministry of Public Health Bangkok
Spain	Dr. M. A. Mukim Director Health Services Mecca	Togo	Mr. M. Glikpo Statisticien Ministère de la Santé publique Lomé
Spain	Dr. J. P. Cortazar Chief Population Movement Section National Institute of Statistics Madrid	Union of Soviet Socialist Republics	Dr. V. K. Ovčarov (Vice-Chairman) Chief Health Statistics Section Semashko Institute of Public Health Administration and History of Medicine Moscow
Sweden	Dr. T. González Chief Demographic Statistics Service National Institute of Statistics Madrid	United Kingdom of Great Britain and Northern Ireland	Dr. M. Arnott Professor of Medicine University of Birmingham
Sweden	Dr. F. J. Y. Grijalba Medical Officer Study Section General Directorate of Health Madrid		Mr. P. J. Cook General Register Office for England and Wales London
Switzerland	Dr. P. Hall Assistant Professor in Medicine Karolinska Institute Stockholm		Mr. L. M. Feery Principal International Branch General Register Office for England and Wales London
Switzerland	Mr. A. Sjöström Acting Chief Division of Statistics National Board of Health Stockholm		Mr. M. Reed (Chairman) Registrar General General Register Office for England and Wales London
Switzerland	Dr. J. C. Hübscher Chef Service des Statistiques médicales Bureau fédéral de Statistique Berne		Dr. A. H. T. Robb-Smith Director of Pathology Radcliffe Infirmary Oxford

Dr. A. Smith Medical Statistician General Registry Office for Scotland Edinburgh	Dr. W. H. Stewart Assistant to Special Assistant to the Secretary (Health and Medical Affairs) Office of the Secretary Department of Health, Education, and Welfare Washington, D.C.
Miss M. Markins General Register Office for England and Wales London	Dr. F. D. Yoder Director of Public Health Illinois State Health Department Springfield, Illinois
United States of America	Dr. D. Curiel (Vice-Chairman) Formerly Medical Chief Division of Epidemiology and Vital Statistics Ministry of Health Caracas
Dr. F. E. Linder (Vice-Chairman) Director National Center for Health Statistics Public Health Service Department of Health, Education, and Welfare Washington, D.C.	Venezuela
Dr. L. N. Dakil Physician and Surgeon McAlester, Oklahoma	Yugoslavia
Dr. P. M. Densen Deputy Commissioner of Health New York City, N.Y.	Professor B. Pirc Head Department of Epidemiology and Statistics School of Public Health University of Zagreb
Dr. R. Dyar Chief Division of Research California State Health Department Berkeley, California	Dr. C. Vukmanovic Chief Department of Health Statistics Federal Institute of Health Belgrade
Mr. E. L. Hamilton Director Medical Statistics Agency Office of the Surgeon-General US Army Washington, D.C.	United Nations New York
Dr. B. MacMahon Professor and Chairman Department of Epidemiology Harvard School of Public Health Cambridge, Massachusetts	Mr. P. J. Loftus Director Statistical Office
Dr. I. M. Moriyama Chief Office of Health Statistics Analysis National Center for Health Statistics Public Health Service Department of Health, Education, and Welfare Washington, D.C.	International Labour Organization Geneva
	Non-Governmental Organizations
	Mrs. R. Ducommun Statistical Branch
	Dr. C. Mariska General Section Social Security Branch
	International League of Dermatological Societies: Professeur W. Jadassohn Directeur Clinique de Dermatologie Université de Genève
	International Society of Cardiology: Dr. P. W. Duchosal Professeur de Médecine Université de Genève
	International Union Against Cancer: Dr. A.H. Sellers Director Medical Statistics Branch Toronto, Ont.

WHO Centre for Classification of Diseases	Dr. C. C. Spicer Chief Medical Statistician, General Register Office Chief, WHO Centre for Classification of Diseases London	Dr. E. F. Krohn Regional Officer for Epidemiology and Health Statistics WHO Regional Office for Europe
Latin American Center for Classi- fication of Diseases	Dr. R. Fuenmayor Herrara Director Latin American Center for Classification of Diseases Caracas	Dr. W. P. D. Logan Director Division of Health Statistics WHO
Secretariat	Dr. M. Cakrtova (Secretary) Chief Development of Health Statistical Services WHO	Mr. J. Nielsen Statistical Adviser WHO Regional Office for the Eastern Mediterranean
	Mr. H. G. Corbett Statistician Development of Health Statistical Services WHO	Dr. R. R. Puffer Chief of Health Statistics Branch WHO Regional Office for the Americas
	Professor J. Knowelden (Consultant) Department of Preventive Medicine and Public Health Sheffield University	

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APPENDIX III

INTERNATIONAL CLASSIFICATION OF DISEASES EIGHTH REVISION

1. Three- and four-digit titles

The following three- and four-digit categories constitute The Detailed List referred to in the Report of the Conference under item 1.2. They are based on the revision proposals submitted to the Conference (WHO/HS/ICD/74.65 Add. 1-17) and on the amendments adopted by the Conference (WHO/HS/8 Rev. Conf./10.65). Editorial changes suggested during the Conference and not appearing in the amendments were incorporated as far as appropriate. A few changes of substance became advisable in the detailed review of the revised classification.

2. Other indications

Apart from the three- and four-digit titles there are various references and notes, in order to enable countries to start work on national adaptations in languages other than those of the international versions.

2.1 References to ICD numbers

New titles were related to the numbers of the current ICD whenever the content was the same or changed in a way which could be expressed in a relatively simple form. Such references were omitted in the Nature-of-injury classification (N-code), the larger part of which corresponds to the three-digit categories of the ICD (Nos. N800-N959). No attempt was made in respect of ICD references for sections which underwent a complete revision, e.g. mental disorders.

2.2 Exclusion notes

Although not exhaustive, exclusion notes were provided for titles that would raise doubts regarding their content.

2.3 Inclusion terms

Inclusion terms are as a rule not stated, although inclusion notes appear in some places. This particularly applies to diseases of the circulatory system, in view of the complexity of the classification.

Fourth digits .8/.9

As recommended by the Conference, fourth digits .8 and .9 were respectively reserved for "Other" and "Unspecified" where both titles conveyed a real meaning. Otherwise .9 was used for "Other and unspecified" or "Other" only in order to save fourth digits for further sub-division. For the same reason absence of an associated condition ("without mention of . . .") was given the fourth digit .9. It should be pointed out that the arrangement may still undergo some changes during the compilation of the full tabular list in the light of the inclusions to be accommodated.

I. INFECTIVE AND PARASITIC DISEASES

This section includes diseases generally recognized as communicable or transmissible. It excludes acute respiratory infections, influenza and pneumonia and certain localized infections.

Intestinal infectious diseases (000-009)

Excludes helminthiasis (120-129)

000 Cholera

.0 Classical
.1 El Tor
.9 Unspecified

001 Typhoid fever

002 Paratyphoid fever

.0 Paratyphoid fever A
.1 Paratyphoid fever B
.2 Paratyphoid fever C
.9 Unspecified

003 Other Salmonella infections

As ICD 042

.0 Without mention of food as vehicle of infection
.1 With food as vehicle of infection

- 004 Bacillary dysentery
 - .0 Shiga
 - .1 Flexner
 - .2 Boyd
 - .3 Sonne
 - .4 Schmitz-Stutzer
 - .8 Other
 - .9 Unspecified
- 005 Food poisoning (bacterial)
 - Excludes Salmonella food poisoning (003.1)
 - .0 Staphylococcal
 - .1 Botulism
 - .2 Due to other clostridia
 - .8 Other bacterial food poisoning
 - .9 Unspecified
- 006 Amoebiasis
 - .0 With liver abscess
 - .8 With other manifestations
 - .9 Unqualified
- 007 Other protozoal intestinal diseases
 - .0 Balantidiasis
 - .1 Giardiasis
 - .2 Coccidiosis
 - .9 Other and unspecified
- 008 Enteritis due to other specified organism
 - .0 Escherichia coli
 - .1 Arizona
 - .2 Other bacteria
 - .3 Bacterial enteritis NOS
 - .9 Other organism, not elsewhere classified
- 009 Diarrhoeal disease
 - .0 Dysentery NOS
 - .1 Diarrhoea
 - .2 Gastro-enteritis and colitis
 - .9 Other

Without mention
of non-infectious
etiology or infect-
ing organism
- Tuberculosis (010-019)*
- 010 Silicotuberculosis
- 011 Pulmonary tuberculosis
- 012 Other respiratory tuberculosis
 - Excludes respiratory tuberculosis, unqualified (011)
 - .0 Primary
 - .1 Pleurisy specified as tuberculous
 - .2 Pleurisy with effusion without mention of cause
 - .3 Tuberculous laryngitis
 - .9 Other
- 013 Tuberculosis of meninges and central nervous system
 - .0 Tuberculous meningitis
 - .9 Other
- 014 Tuberculosis of intestines, peritoneum and mesenteric glands
- 015 Tuberculosis of bones and joints
 - .0 Vertebral column
 - .1 Hip
 - .2 Knee
 - .8 Other
 - .9 Unspecified
- 016 Tuberculosis of genito-urinary system
- 017 Tuberculosis of other organs
 - .0 Skin and subcutaneous cellular tissue
 - .1 Peripheral lymphatic glands
 - .2 Eye
 - .3 Ear
 - .9 Other
- 018 Disseminated tuberculosis
 - .0 Acute miliary tuberculosis specified as non-pulmonary
 - .1 Acute miliary tuberculosis unspecified
 - .9 Other forms of disseminated tuberculosis
- 019 Late effects of tuberculosis
 - .0 Respiratory tuberculosis
 - .1 Central nervous system
 - .2 Bones and joints
 - .3 Genito-urinary system
 - .9 Other specified organs
- Zoonotic bacterial diseases (020-027)*
- 020 Plague
 - .0 Bubonic
 - .1 Pulmonic
 - .9 Unspecified
- 021 Tularaemia
- 022 Anthrax
- 023 Brucellosis
 - .0 Br. melitensis
 - .1 Br. abortus
 - .2 Br. suis
 - .9 Unspecified
- 024 Glanders

025 Melioidosis	039 Other bacterial diseases
026 Rat-bite fever	.0 Gas gangrene .1 Rhinoscleroma .9 Other
.0 Spirillum minus .1 Streptobacillus moniliformis .9 Unspecified	<i>Poliomyelitis and other enterovirus diseases of central nervous system (040-046)</i>
027 Other zoonotic bacterial diseases	040 Acute paralytic poliomyelitis specified as bulbar
.0 Listeriosis .1 Erysipelothrix infection .9 Other	041 Acute poliomyelitis with other paralysis
<i>Other bacterial diseases (030-039)</i>	042 Acute non-paralytic poliomyelitis
Excludes bacterial venereal diseases (098, 099) and bartonellosis (089.0)	043 Acute poliomyelitis, unspecified
030 Leprosy	044 Late effects of acute poliomyelitis
.0 Lepromatous .1 Tuberculoid .2 Indeterminate .3 Borderline .8 Other .9 Unspecified	045 Aseptic meningitis due to enterovirus Excludes aseptic meningitis due to: Poliovirus (042); virus of herpes zoster (053); herpes simplex (054); mumps (072); lymphocytic choriomeningitis (079.2)
031 Other diseases due to mycobacteria	.0 Coxsackie virus .1 ECHO virus .9 Aseptic meningitis, NOS
032 Diphtheria	046 Other enterovirus diseases of central nervous system
033 Whooping cough	<i>Viral diseases accompanied by exanthem (050-057)</i>
.0 B. pertussis .1 B. parapertussis .9 Unspecified	Excludes arthropod-borne viral diseases (060-068)
034 Streptococcal sore throat and scarlet fever	050 Smallpox
.0 Streptococcal sore throat .1 Scarlet fever	.0 Variola major .1 Variola minor (alastrim) .9 Unspecified
035 Erysipelas	051 Cowpox
036 Meningococcal infection	052 Chickenpox
.0 Meningococcal meningitis .1 Meningococcaemia without mention of meningitis .8 Other forms of meningococcal infection .9 Unspecified	053 Herpes zoster
037 Tetanus	054 Herpes simplex
038 Septicaemia	055 Measles
.0 Streptococcal .1 Staphylococcal .2 Pneumococcal .8 Other bacterial .9 Unspecified	056 Rubella (German measles)
	057 Other viral exanthem
	.0 Erythema infectiosum (fifth disease) .1 Exanthema subitum (Roseola infantum) (sixth disease) .8 Other .9 Unspecified

Arthropod-borne viral diseases (060-068)

060 Yellow fever

- .0 Sylvatic
- .1 Urban
- .9 Unspecified

061 Dengue

Excludes haemorrhagic fever caused by dengue virus (067.8)

062 Mosquito-borne viral encephalitis

- .0 Japanese encephalitis
- .1 Western equine encephalitis
- .2 Eastern equine encephalitis
- .3 St. Louis encephalitis
- .4 Murray Valley encephalitis
- .9 Other and unspecified

063 Tick-borne viral encephalitis

- .0 Russian spring-summer ("Taiga")
- .1 Louping-ill encephalitis
- .2 Central-European encephalitis
- .9 Other and unspecified

064 Viral encephalitis transmitted by other arthropods

065 Viral encephalitis, unspecified

066 Late effects of viral encephalitis

067 Arthropod-borne haemorrhagic fever

- .0 Crimean haemorrhagic fever
- .1 Omsk haemorrhagic fever
- .2 Kyasanur Forest disease
- .3 Other tick-borne haemorrhagic fever
- .4 Mosquito-borne haemorrhagic fever
- .5 Haemorrhagic nephroso-nephritis
- .9 Other and unspecified

068 Other arthropod-borne viral diseases

- .0 Phlebotomus fever
- .1 Tick-borne fever
- .2 Mosquito-borne fever
- .9 Other

Other viral diseases (070-079)

070 Infectious hepatitis

Excludes serum hepatitis (N999.2)

071 Rabies

072 Mumps

073 Psittacosis (ornithosis)

074 Specific diseases due to Cocksackie virus

Excludes aseptic meningitis (045)

.0 Herpangina

.1 Epidemic pleurodynia (Bornholm disease)

.2 Epidemic myocarditis of newborn

.9 Other

075 Infectious mononucleosis

076 Trachoma, active

077 Late effects of trachoma

078 Other viral diseases of the conjunctiva

- .0 Inclusion conjunctivitis
- .1 Epidemic kerato-conjunctivitis
- .2 Acute adeno-viral follicular conjunctivitis
- .8 Other
- .9 Viral conjunctivitis NOS

079 Other viral diseases

- .0 Molluscum contagiosum
- .1 Viral warts
- .2 Lymphocytic choriomeningitis
- .3 Cat-scratch disease
- .4 Foot and mouth disease
- .5 Cytomegalic inclusion disease
- .8 Other
- .9 Viral infection NOS

Rickettsioses and other arthropod-borne infectious diseases (080-089)

Excludes arthropod-borne viral diseases (060-068)

080 Epidemic louse-borne typhus

081 Other typhus

- .0 Endemic flea-borne (murine)
- .1 Brill's disease
- .2 Mite-borne (scrub)
- .9 Unspecified

082 Tick-borne rickettsiosis

- .0 Spotted fevers
- .1 Fièvre boutonneuse
- .2 North-Asian tick-borne typhus fever
- .9 Other

083 Other rickettsioses

- .0 Rickettsialpox
- .1 Q fever
- .2 Wolhynian fever (trench fever)
- .8 Other
- .9 Rickettsiosis NOS

084 Malaria¹

- .0 Falciparum malaria (malignant tertian)
- .1 Vivax malaria (benign tertian)
- .2 Malariae malaria (quartan)
- .3 Ovale malaria
- .4 Blackwater fever
- .5 Recurrent induced malaria
- .8 Other forms of malaria
- .9 Unspecified

085 Leishmaniasis

- .0 Visceral (Kala-azar and Mediterranean type)
- .1 Cutaneous
- .2 Mucocutaneous (American)
- .9 Unspecified

086 American trypanosomiasis (Chagas' disease)

- .0 With heart involvement
- .8 With other organ involvement
- .9 Without mention of organ involvement

087 Other trypanosomiasis

- .0 Gambian
- .1 Rhodesian
- .8 African trypanosomiasis NOS
- .9 Trypanosomiasis NOS

088 Relapsing fever

- .0 Louse-borne
- .1 Tick-borne
- .9 Unspecified

089 Other arthropod-borne diseases

- .0 Bartonellosis
- .9 Other

Syphilis and other venereal diseases (090-099)

Excludes non-venereal syphilis (104.0)

090 Congenital syphilis

- .0 Early congenital syphilis, symptomatic (less than five years)
- .1 Early congenital syphilis, latent (less than five years)
- .2 Early congenital syphilis, NOS
- .3 Interstitial keratitis
- .4 Juvenile neurosyphilis
- .5 Other late congenital syphilis, symptomatic (five years and over)

¹When more than one type is mentioned, priority in classification follows the order of listing of numbers in fourth digit.

.6 Late congenital syphilis, latent (five years and over)

- .7 Late congenital syphilis NOS
- .9 Congenital syphilis NOS

091 Early syphilis, symptomatic

- .0 Primary syphilis, except extragenital chancre
- .1 Exogenous chancre
- .2 Secondary syphilis of skin and mucous membranes
- .3 Secondary syphilis, relapse (treated, untreated)
- .8 Other recently acquired syphilis, symptomatic
- .9 Early syphilis NOS

092 Early syphilis, latent

- .0 Early syphilis, latent, serological relapse after treatment
- .9 Early syphilis, latent NOS

093 Cardiovascular syphilis

- .0 Aneurysm of aorta, specified as syphilitic
- .9 Other cardiovascular syphilis

094 Syphilis of central nervous system

- .0 Tabes dorsalis
- .1 General paresis
- .9 Other syphilis of central nervous system

095 Other forms of late syphilis, with symptoms

096 Late syphilis latent (duration two years and over)

097 Other syphilis, and not specified

- .0 Late syphilis NOS
- .1 Latent syphilis NOS
- .2 Syphilis NOS

098 Gonococcal infections

- .0 Acute gonococcal infection of genito-urinary system
- .1 Chronic gonococcal infection of genito-urinary system (over two months' duration)
- .2 Gonococcal infection of eye
- .3 Gonococcal infection of joint
- .8 Gonococcal infection of other sites
- .9 Gonorrhoea, unspecified

099 Other venereal diseases

- .0 Chancroid
- .1 Lymphogranuloma venereum (Nicolas Favre)
- .2 Granuloma inguinale (Donovan)
- .8 Other
- .9 Unspecified

Other spirochaetal diseases (100-104)

100 Leptospirosis

- .0 Leptospirosis ictero-haemorrhagica (Weil's disease)
- .8 Other
- .9 Unspecified

101 Vincent's angina

102 Yaws

- .0 Initial lesions
- .1 Multiple papillomata and "wet crab" yaws
- .2 Other early skin lesions
- .3 Hyperkeratosis
- .4 Gummata, ulcers
- .5 Gangosa
- .6 Bone and joint lesions
- .7 Other manifestations
- .8 Latent yaws
- .9 Yaws NOS

103 Pinta (carate)

- .0 Primary lesions
- .1 Intermediate lesions
- .2 Late lesions
- .3 Mixed lesions
- .9 Unspecified

104 Other spirochaetal infections

- .0 Non-venereal endemic syphilis
- .9 Other

Mycoses (110-117)

110 Dermatophytosis

111 Dermatomycosis, other and unspecified

- .0 Pityriasis versicolor
- .1 Tinea nigra
- .2 Tinea blanca
- .8 Other
- .9 NOS

112 Candidiasis (moniliasis)

113 Actinomycosis

114 Coccidioidomycosis

115 Histoplasmosis

116 Blastomycosis

- .0 European
- .1 North American

.2 South American

.9 Unspecified

117 Other systemic mycosis

- .0 Rhinosporidiosis
- .1 Sporotrichosis
- .2 Chromomycosis
- .3 Aspergillosis
- .4 Maduromycosis
- .8 Other
- .9 Unspecified

Helminthiases (120-129)

120 Schistosomiasis (bilharziasis)

- .0 S. haematobium
- .1 S. mansoni
- .2 S. japonicum
- .3 Cutaneous
- .8 Other
- .9 Unspecified

121 Other trematode infestation

- .0 Opisthorchiasis
- .1 Clonorchiasis
- .2 Paragonimiasis
- .3 Fascioliasis
- .4 Fasciolopsiasis
- .9 Other

122 Hydatidosis

- .0 Liver
- .1 Lung
- .8 Other sites
- .9 Unspecified

123 Other cestode infestation

- .0 Taenia solium infestation, intestinal form
- .1 Cysticercosis (larval form, Taenia solium)
- .2 Taenia saginata infestation
- .3 Taeniasis NOS
- .4 Diphyllobothriasis intestinal
- .5 Sparganosis (larval diphyllobothriasis)
- .6 Hymenolepiasis
- .9 Other

124 Trichiniasis

125 Filarial infestation

- .0 Wuchereriasis
- .1 Brugia filariasis
- .2 Loiasis
- .3 Onchocercosis
- .4 Acanthocheilonemiasis

.5 Mansonelliasis
.8 Other filariasis
.9 Unspecified

126 Ancylostomiasis

.0 Ancylostoma duodenale
.1 Necator americanus
.8 Other ancylostoma
.9 Unspecified

127 Other intestinal helminthiasis

.0 Ascariasis
.1 Strongyloidiasis
.2 Trichuriasis
.3 Enterobiasis
.4 Other intestinal nematode infestation
.5 Mixed intestinal helminthiasis
.9 Intestinal helminthiasis NOS

128 Other and unspecified helminthiasis

.0 Larva migrans, visceralis
.7 Other
.8 Mixed
.9 Unspecified

129 Intestinal parasitism, NOS

Other infective and parasitic diseases (130-136)

130 Toxoplasmosis

.0 Acquired
.1 Congenital active
.2 Late effects of intra-uterine infection
.9 Unspecified

131 Trichomoniasis urogenitalis

132 Pediculosis

133 Acariasis

.0 Scabies
.9 Other

134 Other infestation

.0 Myiasis
.1 Phthirus infestation
.2 Other arthropod infestation
.3 Hirudiniasis
.9 Other

135 Sarcoidosis

136 Other infective and parasitic diseases

II. NEOPLASMS

*Malignant neoplasm of buccal cavity and pharynx
(140-149)*

140 Malignant neoplasm of lip
Excludes malignant neoplasm of skin of lip
(172.0, 173.0)

.0 Upper lip
.1 Lower lip
.2 Both lips
.9 Lip unspecified (including commissure)

141 Malignant neoplasm of tongue

.0 Base of tongue
.1 Dorsal surface
.2 Borders and tip
.3 Ventral surface
.9 Part unspecified

142 Malignant neoplasm of salivary gland

.0 Parotid gland
.8 Other specified salivary gland
.9 Unspecified salivary gland

143 Malignant neoplasm of gum

.0 Upper gum
.1 Lower gum
.9 Gum unspecified

144 Malignant neoplasm of floor of mouth

145 Malignant neoplasm of other and unspecified parts of mouth

.0 Buccal mucosa
.1 Palate (hard) (soft)
.8 Other specified parts
.9 Part unspecified

146 Malignant neoplasm of oropharynx

.0 Tonsil
.8 Other specified parts
.9 Part unspecified

147 Malignant neoplasm of nasopharynx

148 Malignant neoplasm of hypopharynx

.0 Postcricoid region
.1 Pyriform fossa
.8 Other specified parts
.9 Part unspecified

149 Malignant neoplasm of pharynx, unspecified

*Malignant neoplasm of digestive organs and peritoneum
(150-159)*

150 Malignant neoplasm of oesophagus

151 Malignant neoplasm of stomach

- .0 Cardia
- .1 Pylorus
- .8 Other specified parts
- .9 Part unspecified

152 Malignant neoplasm of small intestine, including duodenum

- .0 Duodenum
- .8 Other specified parts
- .9 Part unspecified

153 Malignant neoplasm of large intestine, except rectum

- .0 Caecum, appendix and ascending colon
- .1 Transverse colon, including hepatic and splenic flexures
- .2 Descending colon
- .3 Sigmoid colon
- .8 Large intestine (including colon), part unspecified
- .9 Intestinal tract, part unspecified

154 Malignant neoplasm of rectum and rectosigmoid junction

- .0 Rectosigmoid junction
- .1 Rectum
- .2 Anal canal

155 Malignant neoplasm of liver and intrahepatic bile ducts, specified as primary

- .0 Liver
- .1 Intrahepatic bile ducts

156 Malignant neoplasm of gall-bladder and bile ducts

- .0 Gall-bladder
- .1 Extrahepatic bile ducts
- .2 Ampulla of Vater
- .9 Biliary tract NOS

157 Malignant neoplasm of pancreas

- .0 Head
- .8 Other specified parts
- .9 Unspecified

158 Malignant neoplasm of peritoneum and retro-peritoneal tissue

- .0 Retroperitoneal tissue
- .9 Other and unspecified parts

159 Malignant neoplasm of unspecified digestive organs

Malignant neoplasm of respiratory system (160-163)

160 Malignant neoplasm of nose, nasal cavities, middle ear and accessory sinuses

- .0 Nose (internal) and nasal cavities
- .1 Eustachian tube and middle ear
- .2 Maxillary sinus
- .8 Other sinus
- .9 Unspecified sinus (accessory)

161 Malignant neoplasm of larynx

- .0 Glottis, true vocal cords
- .8 Other specified parts
- .9 Part unspecified

162 Malignant neoplasm of trachea bronchus and lung

- .0 Trachea
- .1 Bronchus and lung

163 Malignant neoplasm of other and unspecified respiratory organs

- .0 Pleura
- .1 Mediastinum
- .9 Site unspecified

Malignant neoplasm of bone, connective tissue, skin and breast (170-174)

170 Malignant neoplasm of bone

- .0 Bones of skull and face
- .1 Lower jaw bone
- .2 Vertebral column (excluding sacrum and coccyx)
- .3 Ribs, sternum and clavicle
- .4 Long bones of upper limb and scapula
- .5 Upper limb, short bones
- .6 Pelvic bones, sacrum, coccyx
- .7 Lower limb, long bones
- .8 Lower limb, short bones
- .9 Site unspecified

171 Malignant neoplasm of connective and other soft tissue

- .0 Head, face and neck
- .1 Trunk
- .2 Upper limb (including shoulder)
- .3 Lower limb (including hip)
- .9 Site unspecified

172 Malignant melanoma of skin

- .0 Lips
- .1 Eyelids, including canthi
- .2 Ear and external auricular canal
- .3 Other and unspecified parts of face

- .4 Scalp and neck
 - .5 Scrotum
 - .6 Trunk, except scrotum
 - .7 Upper limb
 - .8 Lower limb
 - .9 Site unspecified
- 173 Other malignant neoplasm of skin
- .0 Lips
 - .1 Eyelids, including canthi
 - .2 Ear and external auricular canal
 - .3 Other and unspecified parts of face
 - .4 Scalp and neck
 - .5 Scrotum
 - .6 Trunk, except scrotum
 - .7 Upper limb
 - .8 Lower limb
 - .9 Site unspecified
- 174 Malignant neoplasm of breast
- Malignant neoplasm of genito-urinary organs (180-189)*
- 180 Malignant neoplasm of cervix uteri
- 181 Chorionepithelioma
- 182 Other malignant neoplasm of uterus
- .0 Corpus uteri
 - .9 Uterus unspecified
- 183 Malignant neoplasm of ovary, Fallopian tube, and broad ligament
- .0 Ovary
 - .1 Fallopian tube and broad ligament
 - .9 Part unspecified
- 184 Malignant neoplasm of other and unspecified female genital organs
- .0 Vagina
 - .1 Vulva
 - .8 Other specified sites
 - .9 Site unspecified
- 185 Malignant neoplasm of prostate
- 186 Malignant neoplasm of testis
- 187 Malignant neoplasm of other and unspecified male genital organs
- .0 Penis
 - .8 Other specified sites
 - .9 Site unspecified
- 188 Malignant neoplasm of bladder
- 189 Malignant neoplasm of other and unspecified urinary organs
- .0 Kidney, except pelvis
 - .1 Pelvis of kidney
 - .2 Ureter
 - .9 Other and unspecified
- Malignant neoplasm of other and unspecified sites (190-199)*
- 190 Malignant neoplasm of eye
- 191 Malignant neoplasm of brain
- 192 Malignant neoplasm of other parts of nervous system
- .0 Spinal cord
 - .1 Meninges
 - .2 Peripheral nerves
 - .3 Sympathetic nervous system
 - .9 Site unspecified
- 193 Malignant neoplasm of thyroid gland
- 194 Malignant neoplasm of other endocrine glands
- .0 Suprarenal gland
 - .1 Parathyroid gland
 - .2 Thymus
 - .3 Pituitary gland and craniopharyngeal duct
 - .4 Pineal gland
 - .8 Other
 - .9 Unspecified endocrine gland
- 195 Malignant neoplasm of ill-defined sites
- .0 Abdomen, intra-abdominal cancer
 - .1 Pelvis, pelvic viscera, rectovaginal septum
 - .9 Other
- 196 Secondary and unspecified malignant neoplasm of lymph nodes
- .0 Head, face and neck
 - .1 Intrathoracic
 - .2 Intra-abdominal
 - .3 Axillary and upper limb
 - .4 Inguinal and lower limb
 - .7 Other specified sites
 - .8 Multiple sites
 - .9 Site unspecified
- 197 Other secondary malignant neoplasm, primary site unspecified
- .0 Lung, specified as secondary
 - .1 Liver, specified as secondary
 - .2 Liver, unspecified as primary or secondary
 - .3 Brain, specified as secondary

- .4 Bone, specified as secondary
.9 Other sites, specified as secondary
- 198 Malignant neoplasm without specification of site
.0 Multiple
.1 Other
- 199 Secondary malignant neoplasm, primary site known
Not to be used for primary mortality classification
.0 Lymph nodes
.1 Thoracic organs
.2 Liver
.3 Brain
.4 Bone
.9 Other
- Neoplasms of lymphatic and haematopoietic tissue (200-209)*
- 200 Lymphosarcoma and reticulosarcoma
.0 Reticulum-cell sarcoma
.1 Lymphosarcoma
- 201 Hodgkin's disease
- 202 Other neoplasms of lymphoid tissue
.0 Giant follicular lymphoma (Brill-Symmers' disease)
.1 Mycosis fungoides
.2 Other primary malignant neoplasms of lymphoid tissue
.9 Other forms of lymphoma (reticulosis)
- 203 Multiple myeloma (plasmacytoma)
- 204 Lymphatic leukaemia
.0 Acute
.1 Chronic
.9 Unspecified
- 205 Myeloid leukaemia
.0 Acute
.1 Chronic
.9 Unspecified
- 206 Monocytic leukaemia
.0 Acute
.1 Chronic
.9 Unspecified
- 207 Other and unspecified leukaemia
.0 Leukaemia, acute
.1 Leukaemia, chronic
- .2 Acute erythraemia (Di Guglielmo's disease)
.9 Leukaemia, unspecified
- 208 Polycythaemia vera
Excludes secondary polycythaemia (289.0) and acute erythraemia (207.2)
- 209 Myelofibrosis
- Benign neoplasm (210-228)*
- 210 Benign neoplasm of buccal cavity and pharynx
Excludes cyst of jaw (526) and oral soft tissues (528)
.0 Lip
.1 Tongue
.2 Salivary gland
.3 Floor of mouth
.4 Other and unspecified parts of mouth
.5 Tonsil
.6 Other parts of oropharynx
.7 Nasopharynx
.8 Hypopharynx
.9 Pharynx unspecified
- 211 Benign neoplasm of other parts of digestive system
.0 Oesophagus
.1 Stomach
.2 Small intestine
.3 Large intestine, except rectum
.4 Rectum
.5 Liver and biliary passages
.6 Pancreas
.7 Peritoneum and retroperitoneal tissue
.9 Unspecified site
- 212 Benign neoplasm of respiratory system
.0 Nose, nasal cavities, middle ear and accessory sinuses
.1 Larynx
.2 Trachea
.3 Bronchus and lung
.4 Pleura
.5 Mediastinum
.9 Unspecified site
- 213 Benign neoplasm of bone and cartilage
- 214 Lipoma
- 215 Other benign neoplasm of muscular and connective tissue
- 216 Benign neoplasm of skin
.0 Epidermis
.1 Hair follicles and sebaceous glands
.2 Sweat glands and sweat ducts

- .8 Other
Excludes benign melanoma (757.1)
- .9 Unspecified
- 217 Benign neoplasm of breast
- 218 Uterine fibromyoma
- 219 Other benign neoplasm of uterus
- .0 Endometriosis, endometrioma
 - .1 Adenomyosis, adenomyoma
 - .2 Papilloma, polyp
 - .3 Benign cyst
 - .9 Other and unspecified
- 220 Benign neoplasm of ovary
Excludes the listed conditions with ovarian hyperfunction (256.0)
- 221 Benign neoplasm of other female genital organs
- .0 Fallopian tube and broad ligament
 - .1 Vagina
 - .2 Vulva
 - .8 Other specified sites
 - .9 Unspecified site
- 222 Benign neoplasm of male genital organs
- .0 Testis
Excludes the listed conditions with testicular hyperfunction (257.0)
 - .1 Penis
 - .8 Other specified sites
 - .9 Unspecified site
- 223 Benign neoplasm of kidney and other urinary organs
- .0 Kidney, except pelvis
 - .1 Pelvis of kidney
 - .2 Ureter
 - .3 Bladder
 - .8 Other specified sites
 - .9 Unspecified site
- 224 Benign neoplasm of eye
- 225 Benign neoplasm of brain and other parts of nervous system
Excludes neurofibromatosis (743.3)
- .0 Brain
 - .1 Spinal cord
 - .2 Meninges
 - .3 Peripheral nerves
 - .4 Sympathetic nervous system
 - .9 Unspecified site
- 226 Benign neoplasm of endocrine glands
Excludes the listed conditions with endocrine hyperfunction (253, 254, 255, 258)
- .0 Suprarenal gland
 - .1 Thymus
 - .2 Pituitary gland and craniopharyngeal duct
 - .3 Pineal gland
 - .8 Other specified endocrine glands
 - .9 Unspecified site
- 227 Haemangioma and lymphangioma
- 228 Benign neoplasm of other and unspecified organs and tissues
- Neoplasm of unspecified nature (230-239)*
- 230 Neoplasm of unspecified nature of digestive organs
- .0 Oesophagus
 - .1 Stomach
 - .2 Small intestine
 - .3 Large intestine
 - .4 Rectum
 - .5 Liver and biliary passages
 - .6 Pancreas
 - .7 Peritoneum
 - .9 Unspecified site
- 231 Neoplasm of unspecified nature of respiratory organs
- .0 Nose, nasal cavities, middle ear and accessory sinuses
 - .1 Larynx
 - .2 Trachea
 - .3 Bronchus and lung
 - .4 Pleura
 - .5 Mediastinum
 - .9 Unspecified site
- 232 Neoplasm of unspecified nature of skin and musculo-skeletal system
- .0 Bone and cartilage
 - .1 Muscular and connective tissue
 - .2 Skin
- 233 Neoplasm of unspecified nature of breast
- 234 Neoplasm of unspecified nature of uterus
- .0 Carcinoma *in situ* of cervix uteri
 - .1 Cervix uteri, other
 - .9 Other and unspecified parts
- 235 Neoplasm of unspecified nature of ovary

- 236 Neoplasm of unspecified nature of other female genital organs
 .0 Fallopian tube and broad ligament
 .1 Vagina
 .2 Vulva
 .8 Other specified sites
 .9 Unspecified site
- 237 Neoplasm of unspecified nature of other genito-urinary organs
 .0 Testis
 .1 Penis
 .2 Other and unspecified male genital organs
 .3 Kidney, except pelvis
 .4 Pelvis of kidney
 .5 Ureter
 .6 Bladder
 .9 Other and unspecified urinary organs
- 238 Neoplasm of unspecified nature of eye, brain and other parts of nervous system
 .0 Eye
 .1 Brain
 .2 Spinal cord
 .3 Meninges
 .4 Peripheral nerves
 .5 Sympathetic nervous system
 .9 Unspecified site
- 239 Neoplasm of unspecified nature of other and unspecified organs
 .0 Buccal cavity and pharynx
 .1 Endocrine glands
 .9 Other and unspecified sites

III. ENDOCRINE, NUTRITIONAL AND METABOLIC DISEASES

Diseases of thyroid gland (240-246).

- 240 Simple goitre
 As ICD 250 with sub-divisions:
 .0 Endemic
 .1 Sporadic
 .9 Unspecified

- 241 Non-toxic nodular goitre
 As ICD 251 with sub-divisions:
 .0 Endemic
 .1 Sporadic
 .9 Unspecified

- 242 Thyrotoxicosis with or without goitre
 .0 Toxic diffuse goitre
 As ICD 252.0 except for 242.2 below

- .1 Toxic nodular goitre
 As ICD 252.1
 .2 Thyrotoxicosis without mention of goitre

243 Cretinism of congenital origin

244 Myxoedema

245 Thyroiditis

- 246 Other diseases of thyroid gland
 As ICD 254 except thyroiditis (245)

Diseases of other endocrine glands (250-258)

- 250 Diabetes mellitus
 As ICD 260

- 251 Disorders of pancreatic internal secretion other than diabetes mellitus
 As ICD 270

- 252 Diseases of parathyroid gland
 As ICD 271

- .0 Hyperparathyroidism
 .1 Hypoparathyroidism
 .9 Other and unspecified

- 253 Diseases of pituitary gland
 As ICD 272 with sub-divisions:

- .0 Anterior pituitary hyperfunction
 .1 Anterior pituitary hypofunction
 .2 Chromophobe adenoma, pituitary
 .9 Other and unspecified
 Remainder of ICD 272.

- 254 Diseases of thymus gland
 As ICD 273

- 255 Diseases of adrenal glands

- .0 Adrenal cortical hyperfunction
 Excludes congenital hyperadrenocorticism (272.0)
 .1 Adrenal cortical hypofunction
 .2 Pheochromocytoma
 .9 Other and unspecified

- 256 Ovarian dysfunction
 As ICD 275 with sub-divisions:

- .0 Hyperfunction
 .1 Hypofunction
 .9 Ovarian dysfunction NOS

- 257 Testicular dysfunction
 As ICD 276 with sub-divisions:

- .0 Hyperfunction

	.1 Hypofunction	<i>Other metabolic diseases (270-279)</i>
	.9 Testicular dysfunction NOS	
258	Polyglandular dysfunction and other diseases of endocrine glands	270 Congenital disorder of amino-acid metabolism
	.0 Pituitary basophilism	.0 Phenylketonuria
	.1 Polyglandular dysfunction	.1 Cystinuria
	.9 Other and unspecified diseases of endocrine system	.2 Other disorders of amino-acid renal transport
	Remainder of ICD 277 except:	.3 Cystinosis
	Congenital dwarfism (756.6)	.4 Maple syrup disease
	Cushing's syndrome (255.0)	.5 Disorders of purine and pyrimidine metabolism
		.6 Alcaptonuria
		.8 Other
		.9 Unspecified
	<i>Avitaminoses and other nutritional deficiency (260-269)</i>	271 Congenital disorders of carbohydrate metabolism
	Excludes deficiency anaemias (280, 281)	.0 Glycogen storage disease
260	Vitamin A deficiency	.1 Galactosaemia
	.0 Night blindness	.2 Von Gierke's disease
	.1 Xerophthalmia, keratomalacia	.8 Other
	.8 Other manifestation	.9 Unspecified
	.9 Unspecified	
261	Thiamine deficiency (including beriberi)	272 Congenital disorders of lipid metabolism
262	Niacin deficiency (including pellagra)	Excludes amaurotic familial idiocy (342.0) and leukodystrophy (342.1)
263	Other vitamin B deficiency	.0 Disorders of steroid metabolism
	.0 Ariboflavinosis	.1 Xanthomatosis
	.1 Vitamin B6 deficiency	.8 Other
	.8 Other	.9 Unspecified
	.9 Unspecified	
264	Ascorbic acid deficiency (including scurvy)	273 Other and unspecified congenital disorders of metabolism
265	Vitamin D deficiency	.0 Cystic fibrosis (mucoviscidosis)
	.0 Rickets, active	.1 Disorders of porphyrin metabolism
	.1 Rickets, late effect	.2 Haemochromatosis
	.2 Osteomalacia	.3 Hepatolenticular degeneration
	.9 Unspecified	.4 Other disorders involving metabolism of minerals
		.5 Defective bilirubin excretion
		.8 Other
		.9 Unspecified
266	Other vitamin deficiency states	274 Gout
	.0 Vitamin K deficiency	As ICD 288
	.8 Other	
	.9 Unspecified	
267	Protein malnutrition	275 Plasma protein abnormalities
268	Nutritional marasmus	.0 Agammaglobulinaemia
269	Other nutritional deficiency	.1 Hypogammaglobulinaemia
	.0 Sprue and steatorrhoea	.2 Analbuminaemia
	.1 Malabsorption syndrome NOS	.3 Bisalbuminaemia
	.9 Other and unspecified	.4 Cryoglobulinaemia
		.5 Macroglobulinaemia
		.9 Other and unspecified
		276 Amyloidosis
		As ICD 289.1

277	Obesity not specified as of endocrine origin As ICD 287	.2 PTA deficiency .3 Vascular haemophilia .4 Haemorrhagic fibrinolysis (fibrinogenolysis) .5 Circulating anticoagulants .9 Other
278	Other hyperalimentation Excludes conditions due to excess administration of drugs (N963.6)	287 Purpura and other haemorrhagic conditions .0 Allergic purpura .1 Thrombocytopenia .2 Haemorrhagic thrombocythaemia .9 Other
	.0 Hypervitaminosis A .1 Carotinaemia .2 Hypervitaminosis D .9 Other and unspecified	288 Agranulocytosis As ICD 297
279	Other and unspecified metabolic diseases Excludes congenital metabolic defects (270-273)	289 Other diseases of blood and blood-forming organs .0 Polycythaemia, secondary .1 Diseases of spleen As ICD 298 except hepatolienal fibrosis (571) .2 Chronic lymphadenitis As ICD 468.0 .3 Non-specific mesenteric lymphadenitis As ICD 468.1 .4 Lymphadenitis, unspecified As ICD 468.2 .8 Other .9 Unspecified

IV. DISEASES OF BLOOD AND BLOOD-FORMING ORGANS

280	Iron deficiency anaemias As ICD 291
281	Other deficiency anaemias .0 Pernicious anaemia .1 Other vitamin B12 deficiency anaemia .2 Folic acid deficiency anaemia .3 Vitamin B6 deficiency anaemia .4 Protein deficiency anaemia .9 Other and unspecified deficiency anaemia
282	Hereditary haemolytic anaemias .0 Familial acholuric jaundice .1 Hereditary non-spherocytic haemolytic anaemia .2 Hereditary elliptocytosis .3 Mediterranean anaemia .4 Haemoglobinopathies .5 Anaemia due to glucose-6-phosphate dehydrogenase deficiency .9 Other

283	Acquired haemolytic anaemias .0 Acute .9 Other Acquired acholuric jaundice
284	Aplastic anaemias
285	Other and unspecified anaemias .0 Hypochromic anaemia with iron loading .8 Other specified anaemias .9 Anaemia unspecified As ICD 293
286	Coagulation defects .0 Haemophilia .1 Christmas disease

287	Purpura and other haemorrhagic conditions .0 Allergic purpura .1 Thrombocytopenia .2 Haemorrhagic thrombocythaemia .9 Other
288	Agranulocytosis As ICD 297
289	Other diseases of blood and blood-forming organs .0 Polycythaemia, secondary .1 Diseases of spleen As ICD 298 except hepatolienal fibrosis (571) .2 Chronic lymphadenitis As ICD 468.0 .3 Non-specific mesenteric lymphadenitis As ICD 468.1 .4 Lymphadenitis, unspecified As ICD 468.2 .8 Other .9 Unspecified

V. MENTAL DISORDERS

This section is intended primarily for the classification of admissions to mental hospitals, psychiatric clinics, mental deficiency institutions, etc. For this reason, all forms of mental disorder are classified here, even though associated with or secondary to physical conditions as in categories 290-294, 309, 310-315. For primary mortality classification and for morbidity classification where the main interest is not in the mental state, these categories should not be used but assignment made to the underlying cause.

290	Psychoses (290-299)
291	Senile and pre-senile dementia .0 Senile dementia .1 Pre-senile dementia
292	Alcoholic psychosis .0 Delirium tremens .1 Korsakoff's psychosis (alcoholic) .2 Other alcoholic hallucinosis .3 Alcoholic paranoia .9 Other and unspecified
293	Psychosis associated with intracranial infection .0 With general paralysis

.1 With other syphilis of central nervous system
.2 With epidemic encephalitis
.3 With other and unspecified encephalitis
.9 With other and unspecified intracranial infection

293 Psychosis associated with other cerebral condition

.0 With cerebral arteriosclerosis
.1 With other cerebrovascular disturbances
.2 With epilepsy
.3 With intracranial neoplasm
.4 With degenerative diseases of central nervous system
.5 With brain trauma
.9 With other and unspecified cerebral condition

294 Psychosis associated with other physical condition

.0 With endocrine disorders
.1 With metabolic and nutritional disorders
.2 With systemic infections
.3 With drug or poison intoxication
 Excludes alcoholic psychosis (291)
.4 With childbirth
 Excludes psychosis of specified type arising during the puerperium (295-298)
.8 With other physical conditions
.9 With physical condition, NOS

295 Schizophrenia

.0 Simple type
.1 Hebephrenic type
.2 Catatonic type
.3 Paranoid type
.4 Acute schizophrenic episode
 Excludes acute schizophrenia of the types listed above
.5 Latent schizophrenia
.6 Residual schizophrenia
.7 Schizo-affective type
.8 Other
.9 Unspecified type

296 Affective psychoses

.0 Involutional melancholia
.1 Manic-depressive psychosis, manic type
.2 Manic-depressive psychosis, depressed type
 Includes endogenous depression
.3 Manic-depressive psychosis, circular type
.8 Other
.9 Unspecified

297 Paranoid states

 Excludes acute paranoid reaction (298.3)
.0 Paranoia
.1 Involutional paraphrenia
.9 Other

298 Other psychoses

.0 Reactive depressive psychosis
.1 Reactive excitation
.2 Reactive confusion
.3 Acute paranoid reaction
.9 Reactive psychosis unspecified

299 Unspecified psychosis

Neurosis, personality disorders and other non-psychotic mental disorders (300-309)

300 Neuroses

.0 Anxiety neurosis
.1 Hysterical neurosis
.2 Phobic neurosis
.3 Obsessive compulsive neurosis
.4 Depressive neurosis
.5 Neurasthenia
.6 Depersonalization syndrome
.7 Hypochondriacal neurosis
.8 Other
.9 Unspecified neurosis

301 Personality disorders

.0 Paranoid
.1 Affective (cyclothymic)
.2 Schizoid
.3 Explosive
.4 Anancastic (obsessive-compulsive)
.5 Hysterical
.6 Asthenic
.7 Antisocial
.8 Other
.9 Unspecified

302 Sexual deviation

.0 Homosexuality
.1 Fetishism
.2 Pedophilia
.3 Transvestitism
.4 Exhibitionism
.8 Other
.9 Unspecified

303 Alcoholism

 Excludes alcoholic psychosis (291); acute poisoning by alcohol (E860, N980). For primary cause classification it excludes alcoholic cirrhosis of the liver (571.0)

.0 Episodic excessive drinking
.1 Habitual excessive drinking
.2 Alcoholic addiction
.9 Other and unspecified alcoholism

304 Drug dependence

- .0 Opium, opium alkaloids and their derivatives
- .1 Synthetic analgesics with morphine-like effects
- .2 Barbiturates
- .3 Other hypnotics and sedatives or "tranquilizers"
- .4 Cocaine
- .5 Cannabis sativa (hashish, marihuana)
- .6 Other psycho-stimulants
- .7 Hallucinogenics
- .8 Other
- .9 Unspecified

305 Physical disorders of presumably psychogenic origin

- .0 Skin
- .1 Musculo-skeletal
- .2 Respiratory
- .3 Cardiovascular
- .4 Haemic and lymphatic
- .5 Gastro-intestinal
- .6 Genito-urinary
- .7 Endocrine
- .8 Organs of special sense
- .9 Other

306 Special symptoms not elsewhere classified

- .0 Speech disturbance
- .1 Specific learning disturbance
- .2 Tics
- .3 Other psychomotor disorders
- .4 Disorders of sleep
- .5 Feeding disturbances
- .6 Enuresis
- .7 Encopresis
- .8 Cephalalgia
- .9 Other

307 Transient situational disturbances

308 Behaviour disorders of childhood

309 Mental disorders not specified as psychotic associated with physical conditions

- .0 With intracranial infections
- .1 With drug, poison or systemic intoxication
 - Excludes alcoholism (303) and drug dependence (304)
- .2 With brain trauma
- .3 With circulatory disturbance
- .4 With epilepsy
- .5 With disturbance of metabolism, growth or nutrition
- .6 With senile or pre-senile brain disease
- .7 With intracranial neoplasm

- .8 With degenerative diseases of central nervous system
- .9 With other and unspecified physical conditions

Mental retardation (310-315)

310 Borderline mental retardation
IQ 68-85

311 Mild mental retardation
IQ 52-67

312 Moderate mental retardation
IQ 36-51

313 Severe mental retardation
IQ 20-35

314 Profound mental retardation
IQ under 20

315 Unspecified mental retardation

The following fourth-digit sub-divisions should be used with each of the above categories:

- .0 Following infections and intoxications
- .1 Following trauma or physical agents
- .2 With disorders of metabolism, growth or nutrition
- .3 Associated with gross brain disease (post-natal)
- .4 Associated with diseases and conditions due to (unknown) pre-natal influence
- .5 With chromosome abnormalities
- .6 Associated with prematurity
- .7 Following major psychiatric disorder
- .8 With psycho-social (environmental) deprivation
- .9 Other and unspecified

VI. DISEASES OF THE NERVOUS SYSTEM AND SENSE ORGANS

Inflammatory diseases of central nervous system (320-324)

320 Meningitis, except meningococcal, tuberculous and viral

- .0 H. influenzae
- .1 Pneumococcus
- .8 Due to other specified organism
- .9 With no organism specified as cause

321 Phlebitis and thrombophlebitis of intracranial venous sinuses
As ICD 341

- 322 Intracranial and intraspinal abscess
As ICD 342
- 323 Encephalitis, myelitis, and encephalomyelitis (except acute infectious)
As ICD 343
- 324 Late effects of intracranial abscess or pyogenic infection
As ICD 344
- Hereditary and familial diseases of nervous system (330-333)*
- 330 Hereditary neuromuscular disorders
 - .0 Neuropathic muscular atrophy
 - .1 Familial progressive spinal muscular atrophy
 - .2 Amyotonia congenita
 - .3 Progressive muscular dystrophy
 - .9 Other
- 331 Hereditary diseases of the striato-pallidal system
Excludes hepatolenticular degeneration (273.3)
 - .0 Hereditary chorea
 - .1 Dystonia musculorum deformans
 - .2 Progressive familial myoclonic epilepsy (Unverricht-Lundborg)
 - .9 Other
- 332 Hereditary ataxia
 - .0 Hereditary spinal ataxia
 - .1 Hereditary cerebellar ataxia
 - .9 Other and unspecified
- 333 Other hereditary and familial diseases of nervous system
 - .0 Amaurotic familial idiocy
 - .1 Progressive cerebral leukodystrophy
 - .9 Other and unspecified
- Other diseases of central nervous system (340-349)*
- 340 Multiple sclerosis
Excludes diffuse cerebral sclerosis (341)
As ICD 345
- 341 Other demyelinating diseases of central nervous system
- 342 Paralysis agitans
As ICD 350
- 343 Cerebral spastic infantile paralysis
As ICD 351
- 344 Other cerebral paralysis
As ICD 352
- 345 Epilepsy
 - .0 Generalized non-convulsive
 - .1 Generalized convulsive
 - .2 Partial (focalized)
 - .3 Status epilepticus
 - .9 Other and unspecified
- 346 Migraine
As ICD 354
- 347 Other diseases of brain
 - .0 Cataplexy and narcolepsy
 - .9 Other
- 348 Motor neurone disease
 - .0 Amyotrophic lateral sclerosis
As ICD 356.1
 - .1 Progressive bulbar palsy
 - .2 Other progressive muscular atrophy
 - .9 Other and unspecified manifestations
As ICD 356.3 except primary muscular atrophy (733.1)
- 349 Other diseases of spinal cord
 - .0 Syringomyelia and syringobulbia
 - .9 Other
Excludes Landry's paralysis (354)
- Diseases of nerves and peripheral ganglia (350-358)*
- 350 Facial paralysis
As ICD 360
- 351 Trigeminal neuralgia
As ICD 361
- 352 Brachial neuritis
As ICD 362 except brachial radiculitis (728-3)
- 353 Sciatica
As ICD 363 except lumbosacral radiculitis (728-8)
- 354 Polyneuritis and polyradiculitis
- 355 Other and unspecified forms of neuralgia and neuritis
As ICD 366
- 356 Other diseases of cranial nerves
As ICD 367
- 357 Other diseases of peripheral nerves except autonomic
As ICD 368 except vertebrogenic conditions (728)

358 Diseases of peripheral autonomic nervous system
As ICD 369 except vertebrogenic conditions
(728)

.0 Primary acute
.1 Chronic (primary)
.2 Secondary
.9 Unspecified

Inflammatory diseases of the eye (360-369)

360 Conjunctivitis and ophthalmia
Excludes viral conjunctivitis (078) and gonococcal (098.2)

376 Detachment of retina
As ICD 386

361 Blepharitis
As ICD 371

377 Other diseases of retina and optic nerve

362 Hordeolum (sty)
As ICD 372

.0 Vascular lesions of retina
.1 Degeneration of retina
.2 Amblyopia
.3 Colour blindness
.8 Other
.9 Unspecified

363 Iritis

378 Other diseases of eye

364 Keratitis

.0 Chalazion
.9 Other

.0 With ulceration
As ICD 381

379 Blindness
As ICD 389

.9 Without mention of ulcer
As ICD 374

.0 Blindness, both eyes, specifically defined
.1 Blindness, both eyes, not specifically defined
.2 Blindness, one eye, specifically defined
.3 Blindness, one eye, not specifically defined

365 Choroiditis
As ICD 375

Diseases of the ear and mastoid process (380-389)

366 Other inflammation of uveal tract
As ICD 376 except cyclitis and iridocyclitis
(363)

380 Otitis externa
As ICD 390

367 Inflammation of optic nerve and retina
As ICD 377

381 Otitis media without mention of mastoiditis
As ICD 391

368 Inflammation of lachrymal glands and ducts
As ICD 378

.0 Acute
.1 Chronic
.2 Unspecified

369 Other inflammatory diseases of eye
As ICD 379

382 Otitis media with mastoiditis
As ICD 392

.0 Acute
.1 Chronic
.2 Unspecified

370 Refractive errors
As ICD 380

383 Mastoiditis without mention of otitis media
As ICD 393

.0 Acute
.1 Chronic
.2 Unspecified

371 Corneal opacity
As ICD 382

384 Other inflammatory diseases of ear
As ICD 394

372 Pterygium
As ICD 383

385 Ménière's disease
As ICD 395

386 Otosclerosis

387 Other diseases of ear and mastoid process

- .0 Cholesteatoma of ear
- .1 Wax in ear
- .9 Other and unspecified

388 Deaf mutism

As ICD 397

389 Other deafness

As ICD 398

- .0 Deafness, both ears
- .1 Deafness, one ear, and partial deafness in other
- .2 Deafness, one ear
- .3 Impairment of hearing, one or both ears

VII. DISEASES OF THE CIRCULATORY SYSTEM

Active rheumatic fever (390-392)

390 Rheumatic fever without mention of heart involvement

As ICD 400

391 Rheumatic fever with heart involvement

Excludes chronic heart diseases of rheumatic origin (393-398) unless rheumatic fever is also present or there is evidence of recrudescence or activity of the rheumatic process. In cases where there is doubt as to rheumatic activity at the time of death, see Rules for Classification

- .0 Active rheumatic pericarditis
- .1 Active rheumatic endocarditis
- .2 Active rheumatic myocarditis
- .9 Other active rheumatic heart disease

392 Chorea

- .0 With heart involvement
As ICD 402.1
- .9 Without mention of heart involvement
As ICD 402.0

Chronic rheumatic heart disease (393-398)

393 Diseases of pericardium, specified as rheumatic

394 Diseases of mitral valve

Includes the listed conditions with disease of pulmonary or tricuspid valves

- .0 Specified as rheumatic
- .9 Not specified as rheumatic

395 Diseases of aortic valve, specified as rheumatic

Includes the listed conditions with disease of

pulmonary or tricuspid valves

As ICD 411

396 Diseases of mitral and aortic valves

Includes the listed conditions with disease of pulmonary or tricuspid valves

- .0 Specified as rheumatic
- .9 Not specified as rheumatic

397 Diseases of other endocardial structures, specified as rheumatic

As ICD 412-414, specified as rheumatic

398 Other heart disease, specified as rheumatic

Hypertensive disease (400-404)

Categories 400-404 include the listed conditions with arteriosclerosis; they exclude them with ischaemic heart disease (410-414)

400 Malignant hypertension

Includes any condition in 401-404 if specified as malignant or associated with malignant hypertension

- .0 Without mention of organ damage
- .1 With heart involvement (any condition in 427-429)
- .2 With cerebrovascular involvement (any condition in 430-438)
- .3 With renal involvement (any condition in 580-584, 593.2, 792)
- .9 With multiple organ involvement

401 Essential benign hypertension

As ICD 444, 447

Excludes the listed conditions with cerebrovascular disease (430-438)

402 Hypertensive heart disease

Includes any condition in 427-429 with hypertension (benign)

Excludes the listed conditions with any conditions in 403, 584 (404)

403 Hypertensive renal disease

As ICD 446

Excludes the listed conditions with any condition in 402, 427-429 (404)

404 Hypertensive heart and renal disease

Includes any condition in 402 with any condition in 403

Ischaemic heart disease (410-414)

Categories 410-414 include the listed conditions with arteriosclerosis, hypertension (benign) (malignant), or any condition in 427-429. The

following fourth-digit sub-divisions should be used with these categories:

- .0 With hypertension (benign) (malignant)
- .9 Without mention of hypertension

410 Acute myocardial infarction

Includes any condition in 412 specified as acute or with a stated duration of eight weeks or less. Excludes the listed conditions specified as chronic or with a stated duration of over eight weeks (412). Includes them with conditions in 411-413

411 Other acute and sub-acute forms of ischaemic heart disease

412 Chronic ischaemic heart disease

Includes any condition in 410 specified as chronic or with a stated duration of over eight weeks. Excludes the listed conditions specified as acute or with a stated duration of eight weeks or less (410). Includes them with conditions in 413

413 Angina pectoris

414 Asymptomatic ischaemic heart disease

Other forms of heart disease (420-429)

420 Acute pericarditis

421 Acute and sub-acute endocarditis

- .0 Acute and sub-acute bacterial endocarditis
 - As ICD 430.0
- .9 Other acute endocarditis
 - As ICD 430.1

422 Acute myocarditis

As ICD 431

423 Chronic disease of pericardium

424 Chronic disease of endocardium, not specified as rheumatic

Includes the listed conditions when specified as due to hypertension (benign) or arteriosclerosis. When more than one valve is mentioned, priority in classification is in the order mitral valve, aortic valve, other

- .0 Mitral valve, specified as non-rheumatic
- .1 Aortic valve
- .9 Other endocardial structures

425 Cardiomyopathy

426 Pulmonary heart disease

For primary mortality classification, excludes the listed conditions when the underlying pulmonary condition is known

427 Symptomatic heart disease

Excludes the listed conditions with malignant hypertension (400.1), other hypertension (402) and ischaemic heart disease (410-414)

- .0 Congestive heart failure

- .1 Left ventricular failure

- .2 Heart block

- .9 Other disorders of heart rhythm

428 Other myocardial insufficiency

Excludes the listed conditions with malignant hypertension (400.1), other hypertension (402) and ischaemic heart disease (410-414)

- .0 With arteriosclerosis

- .9 Other

Excludes the listed conditions with arteriosclerosis (428.0)

429 Ill-defined heart disease

Excludes the listed conditions with malignant hypertension (400.1), other hypertension (402) and ischaemic heart disease (410-414)

Cerebrovascular disease (430-438)

Categories 430-438 include the listed conditions with arteriosclerosis or hypertension (benign). They exclude them with malignant hypertension (400.2). The following fourth-digit sub-divisions should be used with these categories:

- .0 With hypertension (benign)

- .9 Without mention of hypertension

430 Subarachnoid haemorrhage

As ICD 330

431 Cerebral haemorrhage

As ICD 331

432 Occlusion of pre-cerebral arteries

433 Cerebral thrombosis

434 Cerebral embolism

Includes cerebral infarction NOS, cerebral (artery) occlusion NOS

435 Transient cerebral ischaemia

436 Acute but ill-defined cerebrovascular disease

437 Generalized ischaemic cerebrovascular disease

438 Other and ill-defined cerebrovascular disease
Excludes hemiplegia (old or long-standing) of uncertain origin (344) but
Includes hemiplegia specified as due to hypertension or arteriosclerosis

Diseases of arteries, arterioles and capillaries (440-447)

440 Arteriosclerosis

Excludes the listed conditions with any condition in 400-404, 410-414, 430-438 (assign to these conditions), 428.9 (428.0) and 445.9 (445.0), and when reported as the underlying cause of any condition in 342, 424, 427, 441-444 (assign to these conditions) or of the terms nephritis (chronic) (interstitial) and Bright's disease (chronic) (403)

- .0 Of aorta
- .1 Of renal artery
- .2 Of peripheral arteries
- .3 Of other specified arteries
 - Excludes arteriosclerosis, coronary (412) and cerebral (437)
- .9 Generalized and unspecified

441 Aortic aneurysm (non-syphilitic)

Includes the listed conditions when specified as due to hypertension or arteriosclerosis

- .0 Dissecting aneurysm of aorta (any part)
- .1 Aneurysm of aorta, thoracic or unspecified
- .2 Aneurysm of aorta, abdominal
- .9 Other

442 Other aneurysm

As ICD 452

443 Other peripheral vascular disease

As ICD 453

- .0 Raynaud's syndrome
- .1 Thrombo-angiitis obliterans (Buerger's disease)
- .2 Chilblains
- .9 Other

444 Arterial embolism and thrombosis

- .0 Mesenteric
- .1 Renal
- .2 Peripheral arteries
- .9 Other arteries, not elsewhere classified

445 Gangrene

Excludes diabetic gangrene (250), gas gangrene (039.0), and gangrene of certain sites (see Alphabetical Index)

.0 Arteriosclerotic gangrene
.9 Gangrene not elsewhere classified

446 Other diseases of arteries and arterioles

- .0 Polyarteritis nodosa
- .1 Hypersensitivity angiitis
- .2 Rheumatic arteritis
- .3 Wegener's granulomatosis
- .4 Cranial arteritis
- .5 Thrombotic microangiopathy
- .9 Other

447 Diseases of capillaries

As ICD 467.1

Diseases of veins and lymphatics, and other diseases of circulatory system (450-458)

450 Pulmonary embolism and infarction

As ICD 465

451 Phlebitis and thrombophlebitis

- .0 Of lower extremities
 - As ICD 463
- .9 Of other sites
 - As ICD 464

452 Portal vein thrombosis

453 Other venous embolism and thrombosis

As ICD 466

454 Varicose veins of lower extremities

- .0 With ulcer
- .9 Without mention of ulcer

455 Haemorrhoids

As ICD 461

456 Varicose veins of other sites

As ICD 462

- .0 Of oesophagus
- .1 Of scrotum
- .9 Of other sites

457 Non-infective disease of lymphatic channels

As ICD 468.3

Excludes lymphangitis with cellulitis (682) and lymphadenitis, acute (683), chronic (289.2), mesenteric (289.3), unqualified (289.4)

458 Other diseases of circulatory system

As ICD 467 except diseases of capillaries (447)

- .0 Hypotension
- .9 Other and unspecified circulatory diseases

VIII. DISEASES OF THE RESPIRATORY SYSTEM

Acute respiratory infections (except influenza) (460-466)

460 Acute nasopharyngitis (common cold)
As ICD 470

461 Acute sinusitis
As ICD 471

462 Acute pharyngitis
As ICD 472 without sub-divisions

463 Acute tonsillitis
As ICD 473

464 Acute laryngitis and tracheitis
As ICD 474

465 Acute upper respiratory infection of multiple
or unspecified sites
As ICD 475

466 Acute bronchitis and bronchiolitis
As ICD 500 and bronchiolitis

Influenza (470-474)

470 Influenza unqualified

471 Influenza with pneumonia
As ICD 480

472 Influenza with other respiratory manifestations

473 Influenza with digestive manifestations
As ICD 482

474 Influenza with nervous manifestations
As ICD 483

Pneumonia (480-486)

Excludes lipid pneumonias and eosinophilic pneumonitis (519.2)

480 Viral pneumonia
Excludes influenza virus pneumonia (471);
measles pneumonia (055); psittacotic pneumonia (073)

481 Pneumococcal pneumonia

482 Other bacterial pneumonia

.0 Friedländer's bacillus
.1 Haemophilus influenzae
.2 Streptococcus

.3 Staphylococcus
.9 Other

483 Pneumonia due to other specified organism
Excludes pneumonia in coccidioidomycosis
(114); histoplasmosis (115); Q-fever (083.1);
and other diseases classified as infectious
(000-136)

484 Acute interstitial pneumonia

485 Bronchopneumonia, unspecified
Excludes bronchiolitis (466) and lipoid pneumonia (519.2)

486 Pneumonia, unspecified

Bronchitis, emphysema and asthma (490-493)
Excludes acute bronchitis (466)

490 Bronchitis, unqualified
As ICD 501
Excludes the listed conditions with emphysema
(491)

491 Chronic bronchitis
As ICD 502 without sub-divisions

492 Emphysema
As ICD 527.1
Excludes the listed conditions with bronchitis,
chronic or unqualified (491)

493 Asthma
As ICD 241
Excludes the listed conditions with bronchitis:
acute (466), chronic (491), unqualified (490)
and emphysema (492)

Other diseases of upper respiratory tract (500-508)

500 Hypertrophy of tonsils and adenoids
As ICD 510.0

501 Peritonsillar abscess (quinsy)
As ICD 511

502 Chronic pharyngitis and nasopharyngitis
As ICD 512

.0 Chronic pharyngitis
.1 Chronic nasopharyngitis

503 Chronic sinusitis
As ICD 513

504 Deflected nasal septum
As ICD 514

- 505 Nasal polyp
As ICD 515
- 506 Chronic laryngitis
As ICD 516
- 507 Hay fever
As ICD 240
- 508 Other diseases of upper respiratory tract
As ICD 517
- Other diseases of respiratory system (510-519)*
- 510 Empyema
As ICD 518
- 511 Pleurisy
As ICD 519
- .0 Without mention of effusion or tuberculosis
 - .1 With effusion, with mention of a bacterial cause other than tuberculosis
 - .2 Other specified forms of effusion, except tuberculous
- 512 Spontaneous pneumothorax
As ICD 520
- 513 Abscess of lung
As ICD 521
- 514 Pulmonary congestion and hypostasis
As ICD 522
- 515 Pneumoconiosis due to silica and silicates
Excludes silicotuberculosis (010)
- .0 Silicosis
 - .1 Anthracosilicosis
 - .2 Asbestosis
 - .9 Other, including pneumoconiosis unspecified
- 516 Other pneumoconioses and related diseases
- .0 Due to inhalation of other inorganic dust
 - .1 Due to inhalation of other dust
 - .2 Due to inhalation of fumes
- 517 Other chronic interstitial pneumonia
As ICD 525 (with deletion of note)
- 518 Bronchiectasis
As ICD 526
- 519 Other diseases of respiratory system
- .0 Pulmonary collapse
As ICD 527.0
 - .1 Acute oedema of lung without mention of heart
- .2 Other diseases of lung
.9 Other
As ICD 527.2, except acute oedema of lung (519.1)
- IX. DISEASES OF THE DIGESTIVE SYSTEM**
- Diseases of oral cavity, salivary glands and jaws (520-529)*
- 520 Disorders of tooth development and eruption
- .0 Anodontia
Excludes missing tooth with abnormal spacing (524.3)
 - .1 Supernumerary teeth
Excludes supernumerary teeth causing crowding (524.3)
 - .2 Abnormalities of size and form
 - .3 Mottled teeth
 - .4 Enamel hypoplasia
 - .5 Hereditary disturbances in tooth structure NEC
 - .6 Disturbances in tooth eruption
Excludes impacted, embedded teeth with abnormal position of such teeth or adjacent teeth (524.3)
 - .7 Teething syndrome
 - .9 Other and unspecified
- 521 Diseases of hard tissues of the teeth
- .0 Dental caries
 - .1 Attrition
 - .2 Abrasion
 - .3 Erosion
 - .4 Resorption
 - .5 Hypercementosis
 - .6 Ankylosis
 - .7 Posteruptive colour changes
 - .8 Irradiated enamel
 - .9 Other and unspecified
- 522 Diseases of pulp and periapical tissues
- .0 Pulpitis
 - .1 Necrosis of the pulp
 - .2 Pulp degenerations
 - .3 Abnormal hard tissue formation in pulp
 - .4 Acute apical periodontitis
 - .5 Periapical abscess
 - .6 Chronic apical periodontitis (granuloma)
 - .7 Fistula from periapical lesions
 - .8 Radicular cyst
 - .9 Other and unspecified
- 523 Periodontal diseases
- .0 Acute gingivitis
 - .1 Chronic gingivitis

- .2 Gingival recession
 - .3 Acute periodontitis
 - .4 Chronic periodontitis
 - .5 Periodontosis
 - .6 Accretions on teeth
 - .9 Other and unspecified
- 524 Dentofacial anomalies including malocclusion
- .0 Major anomalies of jaw size
 - .1 Anomalies of jaw-cranial base relationship
 - .2 Anomalies of dental arch relationship
 - .3 Anomalies of tooth position
 - .4 Malocclusion NOS
 - .5 Dentofacial functional abnormalities
 - .9 Other and unspecified
- 525 Other diseases and conditions of the teeth and supporting structures
- .0 Acquired absence of teeth
 - Excludes missing teeth causing malocclusion (524.3)
 - .1 Atrophy of edentulous alveolar ridge
 - .9 Other and unspecified
- 526 Diseases of the jaws
- .0 Developmental dental cysts
 - Excludes radicular cyst (522.8)
 - .1 Fissural cysts
 - .2 Other cysts
 - .3 Reparative giant cell granuloma
 - .4 Inflammatory conditions
 - .5 Alveolitis (dry socket)
 - .9 Other and unspecified
- 527 Diseases of the salivary glands
- .0 Atrophy
 - .1 Hypertrophy
 - .2 Sialoadenitis
 - .3 Abscess
 - .4 Fistula
 - .5 Sialolithiasis
 - .6 Mucocele (ranula)
 - .7 Disturbances of salivary secretion
 - .8 Sialosis
 - .9 Other and unspecified
- 528 Diseases of the oral soft tissues, excluding gingiva and tongue
- .0 Stomatitis
 - Excludes Vincent's stomatitis (101)
 - .1 Cancrum oris (noma)
 - .2 Oral aphthous ulceration
 - .3 Cellulitis and abscess
 - .4 Cysts
- .5 Diseases of lips
 - Excludes angular cheilosis in vitamin deficiency (262, 263)
 - .6 Leukoplakia
 - .7 Other disturbances of keratinisation
 - .8 Oral submucous fibrosis
 - .9 Other and unspecified
- 529 Diseases of the tongue and other oral conditions
- .0 Median rhomboid glossitis
 - .1 Geographical tongue (benign, migratory glossitis)
 - .2 Other glossitis
 - .3 Hypertrophy of tongue papillae
 - .4 Atrophy of tongue papillae
 - .5 Plicated tongue
 - .6 Glossodynbia (glossopyrosis)
 - .9 Other and unspecified
- Diseases of oesophagus, stomach and duodenum (530-537)*
- 530 Diseases of oesophagus
- As ICD 539
 - .0 Functional disorders of oesophagus
 - .9 Other
- 531 Ulcer of stomach
- As ICD 540 except peptic ulcer NOS (533)
 - .0 With perforation
 - .9 Without mention of perforation
- 532 Ulcer of duodenum
- As ICD 541
 - .0 With perforation
 - .9 Without mention of perforation
- 533 Peptic ulcer, site unspecified
- .0 With perforation
 - .9 Without mention of perforation
- 534 Gastrojejunal ulcer
- As ICD 542
 - .0 With perforation
 - .9 Without mention of perforation
- 535 Gastritis and duodenitis
- As ICD 543
- 536 Disorders of function of stomach
- As ICD 544
 - .0 Disorders of gastric secretion
 - .1 Disorders of gastric motility
 - .9 Other

537 Other diseases of stomach and duodenum

As ICD 545

Appendicitis (540-543)

540 Acute appendicitis

As ICD 550

.0 With peritonitis

.9 Without mention of peritonitis

541 Appendicitis, unqualified

As ICD 551

542 Other appendicitis

As ICD 552

543 Other diseases of appendix

As ICD 553

Hernia of abdominal cavity (550-553)

550 Inguinal hernia without mention of obstruction

As ICD 560.0

551 Other hernias of abdominal cavity without mention of obstruction

.0 Femoral

As ICD 560.1

.1 Umbilical

As ICD 560.2

.2 Ventral (incisional)

As ICD 560.3

.3 Diaphragmatic

Excludes hernias due to gross congenital defect of diaphragm (756.8)

.8 Of other specified sites

As ICD 560.4 except diaphragmatic hernia above

.9 Of unspecified site

As ICD 560.5

552 Inguinal hernias with obstruction

As ICD 561.0

553 Other hernia of abdominal cavity with obstruction

.0 Femoral

As ICD 561.1

.1 Umbilical

As ICD 561.2

.2 Ventral (incisional)

As ICD 561.3

.3 Diaphragmatic

Excludes hernia due to gross congenital defect of diaphragm (756.8)

.8 Of other specified sites

As ICD 561.4 except diaphragmatic hernia above

.9 Of unspecified site

As ICD 561.5

Other diseases of intestine and peritoneum (560-569)

560 Intestinal obstruction without mention of hernia

As ICD 570 except mesenteric infarction (447.0)

.0 Intussusception

.1 Paralytic ileus

.2 Volvulus

.3 Impaction of intestine

.9 Other and unspecified

561 Gastro-enteritis and colitis, except ulcerative, of non-infectious origin

Excludes colitis, diarrhoea, enteritis, gastro-enteritis, infectious or unspecified (009)

562 Diverticula of intestine

.0 Small intestine

.1 Colon

563 Chronic enteritis and ulcerative colitis

.0 Regional enteritis

As ICD 572.0

.1 Ulcerative colitis

As ICD 572.2

.9 Other

As ICD 572.3

564 Functional disorders of intestines

.0 Constipation

As ICD 573.0

.1 Irritable colon

.9 Other

As ICD 573.3 except membranous colitis (564.1)

565 Anal fissure and fistula

.0 Anal fissure

.1 Anal fistula

566 Abscess of anal and rectal regions

As ICD 575

567 Peritonitis

As ICD 576

568 Peritoneal adhesions

As ICD 577

569 Other diseases of intestines and peritoneum
As ICD 578

"NOS" when specified as arteriosclerotic or
due to any condition in 440(403)

Diseases of liver, gallbladder and pancreas (570-577)

570 Acute and subacute necrosis of liver
As ICD 580

571 Cirrhosis of liver

.0 Alcoholic
.9 Other

572 Suppurative hepatitis and liver abscess
As ICD 582

573 Other diseases of liver

As ICD 583 except portal vein obstruction
(452)

574 Cholelithiasis
As ICD 584

575 Cholecystitis and cholangitis, without mention of
calculi
As ICD 585

576 Other diseases of gallbladder and biliary ducts
As ICD 586

577 Diseases of pancreas

.0 Acute pancreatitis
As ICD 587.0
.1 Chronic pancreatitis
As ICD 587.1
.9 Other diseases of pancreas
As ICD 587.2 except fibrocystic disease
of pancreas (273.0)

X. DISEASES OF GENITO-URINARY SYSTEM

Nephritis and nephrosis (580-584)

Categories 580-583 (but not 584) include the listed
conditions with hypertension (benign) but exclude
them with malignant hypertension (400.3)

580 Acute nephritis

581 Nephrotic syndrome

582 Chronic nephritis

Excludes the terms "chronic Bright's disease,"
"chronic interstitial nephritis" and "chronic
nephritis NOS" when specified as arterio-
sclerotic or due to any condition in 440(403)

583 Nephritis unqualified

Excludes the terms "Bright's disease NOS,"
"interstitial nephritis NOS" and "nephritis

584 Renal sclerosis, unqualified

Excludes the conditions when specified as
arteriosclerotic or due to any condition in 401,
403 (403), 402, (404) or malignant hypertension
(400.3). It also excludes contracted kidney,
hydronephrotic (591) and pyelonephritic (590.0)

Other diseases of urinary system (590-599)

590 Infections of kidney

.0 Chronic pyelonephritis
.1 Other pyelonephritis, pyelitis and pyelocystitis
Remainder of ICD 600.0
.2 Abscess of kidney and perirenal tissue
As ICD 600.1
.9 Other
As ICD 600.2

591 Hydronephrosis

As ICD 601

592 Calculi of kidney and ureter

As ICD 602

593 Other diseases of kidney and ureter

.0 Renal dwarfism
.1 Acute tubular nephrosis
Excludes traumatic anuria (crush syndrome)
(N996.7)
.2 Other renal disease
.3 Obstruction of ureter, not elsewhere classified
.4 Other diseases of ureter
Rest of ICD 603

594 Calculi of other parts of the urinary system
As ICD 604

595 Cystitis

As ICD 605

596 Other diseases of bladder

As ICD 606

597 Urethritis (non-venereal)

As ICD 607

598 Stricture of urethra

As ICD 608

599 Other diseases of urinary tract

Diseases of male genital organs (600-607)

600 Hyperplasia of prostate

As ICD 610

- 601 Prostatitis
As ICD 611
- 602 Other diseases of prostate
As ICD 612
- 603 Hydrocele
As ICD 613
- 604 Orchitis and epididymitis
As ICD 614
- 605 Redundant prepuce and phimosis
As ICD 615
- 606 Sterility, male
As ICD 616
- 607 Other diseases of male genital organs
As ICD 617 with sub-divisions:
.0 Leukoplakia of penis
.1 Erythroplasia of penis
.2 Chronic ulceration of penis
.3 Balanitis
.4 Seminal vesiculitis
.5 Other inflammatory diseases
.6 Spermatocele
.7 Torsion of testis
.8 Atrophy of testicle
.9 Other
Remainder of ICD 617
- Diseases of breast, ovary, Fallopian tube and parametrium (610-616)*
- 610 Chronic cystic disease of breast
As ICD 620
- 611 Other diseases of breast
.0 Acute mastitis not associated with lactation
As ICD 621.0
.1 Hypertrophy of breast
As ICD 621.1
.2 Fissure of nipple
.9 Other
Remainder of ICD 621.2
- 612 Acute salpingitis and oophoritis
As ICD 622
- 613 Chronic salpingitis and oophoritis
As ICD 623
- 614 Salpingitis and oophoritis, unqualified
As ICD 624
- 615 Other diseases of ovary and Fallopian tube
As ICD 625 with sub-divisions:
.0 Prolapse of ovary
.1 Hydrosalpinx
.2 Ovarian cyst, retention
.9 Other
Remainder of ICD 625
- 616 Diseases of parametrium and pelvic peritoneum (female)
As ICD 626 with sub-divisions:
.0 Pelvic inflammatory disease
.1 Pelvic peritoneal adhesions, female
.2 Pelvic congestion, female
.9 Other
Remainder of ICD 626 except rectovaginal fistula (629.8)
- Diseases of uterus and other female genital organs (620-629)*
- 620 Infective diseases of cervix uteri
Excludes trichomonal infections (131)
.0 Chronic cervicitis
.1 Other cervicitis
- 621 Other diseases of cervix
.0 Leukoplakia of cervix
.1 Erythroplasia of cervix
.2 Hyperplastic endometritis of cervix
.3 Chronic erosion and ulceration of cervix
.4 Old laceration of cervix
.5 Stricture of cervix
.6 Atrophy of cervix
.9 Other
- 622 Infective diseases of uterus (except cervix), vagina and vulva
Excludes trichomonal infections (131)
.0 Infective disease of uterus, except cervix
As ICD 630.1
.1 Vaginitis and vulvitis
As ICD 630.2
- 623 Uterovaginal prolapse
.0 Cystocele
.1 Rectocele
.2 Urethrocele
.3 Vaginal enterocele
.9 Other
Remainder of ICD 631

624 Malposition of uterus

As ICD 632 with sub-divisions:

- .0 Retroversion and retroflexion
- .8 Other
- .9 Unspecified

Remainder of ICD 632

625 Other diseases of uterus

- .0 Hyperplasia of endometrium
- .1 Atrophy of uterus
- .2 Subinvolution of uterus
- .9 Other

626 Disorders of menstruation

As ICD 634 with sub-divisions:

- .0 Absent
- .1 Scanty
- .2 Excessive
- .3 Painful
- .4 Frequent
- .5 Irregular
- .6 Intermenstrual bleeding
- .7 Postmenopausal bleeding
- .9 Other

Remainder of ICD 634

627 Menopausal symptoms

As ICD 635

628 Sterility, female

As ICD 636

629 Other diseases of female genital organs

- .0 Leukoplakia of vagina
 - .1 Erythroplasia of vagina and vulva
 - .2 Kraurosis of vulva
 - .3 Leukorrhoea
- As ICD 637.0
- .4 Unspecified infection
 - .5 Vaginal bleeding
 - .6 Old laceration
 - .7 Stricture or atresia of vagina and hymen
 - .8 Rectovaginal fistula
 - .9 Other

**XI. COMPLICATIONS OF PREGNANCY,
CHILD-BIRTH AND THE PUERPERIUM**

Complications of pregnancy (630-634)

630 Infections of genital tract during pregnancy

Any condition in 612, 613, 614, 616, 620 or
622 arising during pregnancy

631 Ectopic pregnancy

- .0 Abdominal pregnancy, without mention of sepsis
- .1 Tubal pregnancy, without mention of sepsis
- .2 Ovarian pregnancy, without mention of sepsis
- .3 Other or unspecified ectopic pregnancy, without mention of sepsis
- .4 Abdominal pregnancy, with sepsis
- .5 Tubal pregnancy, with sepsis
- .6 Ovarian pregnancy, with sepsis
- .9 Other or unspecified ectopic pregnancy, with sepsis

632 Haemorrhage of pregnancy

- .0 Placenta praevia
- .1 Premature separation of placenta
- .2 Haemorrhage from marginal sinus
- .3 Threatened abortion
- .4 Due to afibrinogenaemia
- .9 Other and unspecified

633 Anaemia of pregnancy

As ICD 646 with sub-divisions:

- .0 Macrocytic anaemia of pregnancy
- .1 Iron deficiency anaemia of pregnancy
- .9 Other and unspecified anaemia of pregnancy

634 Other complications of pregnancy

.0 Malposition of foetus in uterus

Excludes delivery with abnormal presentation (656)

- .1 Rupture of pregnant uterus
- .2 Hydatidiform mole
- .3 Placental abnormalities not elsewhere classified
- .4 Hydramnios
- .5 Air embolism during pregnancy
- .6 Molar pregnancy, undelivered
- .9 Other

Urinary infections and toxæmias of pregnancy and the puerperium (635-639)

635 Urinary infections arising during pregnancy and the puerperium

- .0 Pyelitis and pyelonephritis
- .9 Other urinary infection

636 Renal disease arising during pregnancy and the puerperium

Any condition in 580, 581 or 583 arising during pregnancy and the puerperium. Excludes the listed conditions with pre-eclampsia (637.0) or eclampsia (637.1)

637 Pre-eclampsia, eclampsia and toxæmia, unspecified

.0 Pre-eclampsia

.1 Eclampsia

.9 Toxæmia, unspecified

638 Hyperemesis gravidarum

.0 With neuritis

.9 Without mention of neuritis

639 Other toxæmias of pregnancy and the puerperium

.0 Acute and subacute necrosis of liver

.9 Other

Abortion (640-645)

Categories 640-645 include any interruption of pregnancy before 28 weeks of gestation with a dead foetus. The following fourth-digit sub-divisions should be used with categories 640, 641, 643-645

.0 With sepsis

With mention of sepsis or any condition in 635, 670, 671 or 673.9

.1 With toxæmia

With mention of toxæmia or any condition in 636-639

.2 With sepsis and toxæmia

.9 Without mention of sepsis or toxæmia

640 Abortion induced for medical indications

For primary mortality tabulations, excludes the listed conditions if the complication of pregnancy or other pre-existing disease requiring the induction is known

641 Abortion induced for other legal indications

642 Abortion induced for other reasons

.0 With sepsis

.1 With haemorrhage

.2 With sepsis and haemorrhage

.3 With laceration of pelvic organ (with or without mention of sepsis and haemorrhage)

.9 Without mention of sepsis, haemorrhage or laceration

643 Abortion specified as spontaneous

644 Abortion not specified as induced or spontaneous

645 Other abortion

Delivery (650-662)

The following fourth-digit sub-divisions should be used with these categories:

.0 Spontaneous

.1 Manipulation without instruments

.2 Forceps, mid and high

.3 Forceps, low

.4 Forceps, unspecified

.5 Vacuum extractor

.6 Caesarian section

.8 Other surgical or instrumental

.9 Unspecified type of delivery

650 Delivery without mention of complication

As ICD 660

651 Delivery complicated by placenta praevia or antepartum haemorrhage

As ICD 670

652 Delivery complicated by retained placenta

As ICD 671

653 Delivery complicated by other postpartum haemorrhage

As ICD 672

654 Delivery complicated by abnormality of bony pelvis

As ICD 673

655 Delivery complicated by foetopelvic disproportion

Excludes the conditions with mention of abnormality of bony pelvis (654)

656 Delivery complicated by malpresentation of foetus

Excludes the conditions with mention of disproportion (655)

657 Delivery complicated by prolonged labour of other origin

As ICD 675

658 Delivery with laceration of perineum, without mention of other laceration

As ICD 676

659 Delivery with rupture of uterus

660 Delivery with other obstetrical trauma

As ICD 677 except rupture of uterus (659)

661 Delivery with other complications

As ICD 678

662 Anaesthetic death in uncomplicated delivery

Excludes anaesthetic death in complicated deliveries (651-661)

Complications of the puerperium (670-678)

670 Sepsis of child-birth and the puerperium

As ICD 681

- 671 Puerperal phlebitis and thrombosis
As ICD 682
- 672 Pyrexia of unknown origin during the puerperium
As ICD 683
- 673 Puerperal pulmonary embolism
.0 Air embolism
.1 Amniotic fluid embolism
.9 Other and unspecified
- 674 Cerebral haemorrhage in the puerperium
As ICD 687
- 675 Puerperal blood dyscrasias
- 676 Anaemia of puerperium
As ICD 688.0
- 677 Other and unspecified complications of the puerperium
.0 Sudden death from unknown cause in the puerperium
As ICD 688.2
.9 Other
As ICD 688.3
- 678 Mastitis and other disorders of lactation
As ICD 689
- XII. DISEASES OF THE SKIN AND SUBCUTANEOUS TISSUE**
- Infections of skin and subcutaneous tissue (680-686)*
Excludes viral warts (079.1) and molluscum contagiosum (079.0)
- 680 Boil and carbuncle
As ICD 690
.0 Of face
.1 Of neck
.2 Of trunk
.3 Of upper arm and forearm
.4 Of hand
.5 Of buttock
.6 Of other parts of lower extremity
.8 Of other and multiple sites
.9 Of unspecified site
- 681 Cellulitis of finger and toe
As ICD 691
- 682 Other cellulitis and abscess
As ICD 692 and 693
.0 Of head and neck
.1 Of trunk
- .2 Of upper arm and forearm
.3 Of hand, except fingers
.4 Of leg
.5 Of foot, except toes
.9 Of other, multiple, and unspecified sites
- 683 Acute lymphadenitis
As ICD 694
- 684 Impetigo
As ICD 695
- 685 Pilonidal cyst
As ICD 221
- 686 Other local infections of skin and subcutaneous tissue
As ICD 698 with sub-divisions:
.0 Pyoderma
.1 Pyogenic granuloma
.9 Other
- Other inflammatory conditions of skin and subcutaneous tissue (690-698)*
- 690 Seborrhoeic dermatitis
As ICD 700
- 691 Infantile eczema and related conditions
- 692 Other eczema and dermatitis
Includes allergic eczema and contact dermatitis
.0 Due to detergents
.1 Due to oils and greases
As ICD 703.1
.2 Due to solvents
As ICD 703.2
.3 Due to drugs
As ICD 703.3
.4 Due to other chemicals
As ICD 703.4
.5 Due to food
.6 Due to plants (except food)
As ICD 703.0
.7 Due to radiation, except sunburn
As ICD 703.5
.8 Due to other specified agents
As ICD 703.6 plus sunburn
.9 Unspecified cause
- 693 Dermatitis herpetiformis
As ICD 704.0
- 694 Pemphigus
As ICD 704.1

- 695 Erythematous conditions
As ICD 705
- .0 Toxic erythema
 - .1 Erythema multiforme (erythema iris)
 - .2 Erythema nodosum
 - .3 Rosacea
 - .4 Lupus erythematosus
 - .9 Other and unqualified
- 696 Psoriasis and similar disorders
- .0 Psoriatic arthropathy
 - .1 Other psoriasis
As ICD 706.0
 - .2 Parapsoriasis
As ICD 706.1
 - .3 Pityriasis rosea
As ICD 706.2
 - .4 Pityriasis rubra pilaris
 - .5 Other and unspecified pityriasis
Remainder of ICD 706.3
 - .9 Other
As ICD 706.4
- 697 Lichen
- .0 Lichen planus
 - .1 Lichen nitidus
 - .9 Other and unspecified
Remainder of ICD 707
- 698 Pruritus and related conditions
- .0 Pruritus ani
As ICD 708.0
 - .1 Pruritus of genital organs
As ICD 708.1
 - .2 Prurigo
As ICD 708.2
 - .3 Lichenification and lichen simplex chronicus
As ICD 708.3 except diffuse neurodermatitis (Brocq) and atopic eczema (691)
 - .4 Dermatitis factitia (artefacta)
As ICD 708.4
 - .9 Other pruritic conditions
As ICD 708.5
- Other diseases of skin and subcutaneous tissue (700-709)*
- 700 Corns and callosities
As ICD 709
- 701 Other hypertrophic and atrophic conditions of skin
Excludes hereditary oedema of legs (757.0); scleroderma (generalized) (737.0); and dermatomyositis (716.0)
- .0 Circumscribed scleroderma
- .1 Keratoderma
As ICD 710.1
Except congenital conditions (757.1) seborrhoeic warts and seborrhoeic keratosis (216.0)
- .2 Striae atrophicae
As ICD 710.3
- .3 Keloid scar
As ICD 710.4
- .9 Other hypertrophic and atrophic conditions of skin
As ICD 710.5
- 702 Other dermatoses
As ICD 711 except congenital conditions (757.2) and senile wart (216.0)
- 703 Diseases of nail
As ICD 712 except congenital conditions (757.4)
- 704 Diseases of hair and hair follicles
As ICD 713 except congenital conditions (757.3)
- 705 Diseases of sweat glands
- .0 Anhidrosis
 - .1 Prickly heat
 - .9 Other
Remainder of ICD 714.0 except hidrocystoma (216.2)
- 706 Diseases of sebaceous glands
- .1 Acne varioliformis
 - .2 Other acne
Remainder of ICD 714.1
 - .3 Sebaceous cyst
 - .4 Seborrhoea
 - .9 Other
Remainder of ICD 714.2
- 707 Chronic ulcer of skin
As ICD 715
- 708 Urticaria
- .0 Angioneurotic oedema
As ICD 242
 - .9 Other
As ICD 243
- 709 Other diseases of skin
As ICD 716 except congenital conditions (757.2, 757.9)

XIII. DISEASES OF THE MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE

Arthritis and rheumatism, except rheumatic fever
(710-718)

710 Acute arthritis due to pyogenic organisms
As ICD 720

711 Acute non-pyogenic arthritis
As ICD 721

712 Rheumatoid arthritis and allied conditions

- .0 Juvenile rheumatoid arthritis
- .1 Rheumatoid arthritis with spleno-adenomegaly and leukopenia
- .2 Palindromic rheumatism
- .3 Other rheumatoid arthritis
Remainder of ICD 722.0
- .4 Spondylitis ankylopoietica
As ICD 722.1
- .5 Chronic rheumatic nodular fibrosis
As ICD 722.2

713 Osteo-arthritis (arthrosis) and allied conditions

- .0 Osteo-arthritis (arthrosis)
As ICD 723.0
- .1 Spondylitis osteo-arthritis (spondylarthritis)
- .2 Traumatic spondylopathy

714 Other specified forms of arthritis

- .0 Traumatic arthritis
- .9 Other
Remainder of ICD 724

715 Arthritis, unspecified
As ICD 725

716 Myositis
Excludes infective myositis (732)

- .0 Dermatomyositis
- .1 Chronic polymyositis
- .9 Other

717 Other non-articular rheumatism

- .0 Lumbago
As ICD 726.0
- .1 Myofibrosis scapulohumeral
- .2 Torticollis not specified as congenital, psychogenic, or traumatic
As ICD 726.2
- .9 Other muscular rheumatism, fibrosis, and myalgia

718 Rheumatism, unspecified
As ICD 727

Osteomyelitis and other diseases of bone and joint
(720-729)

720 Osteomyelitis and periostitis

As ICD 730 except osteomyelitis and periostitis of the jaw (526.4)

- .0 Acute osteomyelitis
- .1 Chronic osteomyelitis
- .2 Unspecified osteomyelitis
- .3 Periostitis without mention of osteomyelitis

721 Osteitis deformans

As ICD 731

722 Osteochondrosis

- .0 Juvenile osteochondrosis of spine
- .1 Juvenile osteochondrosis of hip
- .2 Other juvenile osteochondrosis
- .8 Other specified forms of osteochondrosis
- .9 Unspecified

723 Other diseases of bone

- .0 Osteoporosis
- .1 Hypertrophic pulmonary osteo-arthropathy
- .9 Other
Remainder of 733 except: Polyostotic fibrous dysplasia of bone (756.6); Cyst of jaw (526.0-526.2); Granuloma of jaw (526.3); Prognathism retrognathia (524.1)

724 Internal derangement of joint

- .0 Elbow
- .1 Knee
- .9 Other

725 Displacement of intervertebral disc

As ICD 735 with sub-divisions:

- .0 Cervical
- .1 Lumbar and lumbosacral
- .8 Other
- .9 Unspecified

726 Affection of sacroiliac joint

As ICD 736

727 Ankylosis of joint

As ICD 737 with sub-divisions:

- .0 Of spine
- .1 Of shoulder
- .2 Of elbow
- .3 Of wrist
- .4 Of finger
- .5 Of hip
- .6 Of knee
- .7 Of ankle
- .8 Of other and multiple sites
- .9 Of unspecified site

728 Vertebrogenic pain syndromes

Excludes the conditions stated as due to dis-
placement of intervertebral disc (725); rheu-
matoid arthritis (712); spondyloarthritis
(713.1); spondylitis (713.2)

.0 Cervicalgia

.1 Cervico-cranial syndrome

.2 Cervico-brachial diffuse syndrome

.3 Radicular syndrome of upper limbs

Excludes brachial neuritis NOS (352)

.4 Cervical myopathy

.5 Pain in thoracic spine (with radicular and
visceral pain)

.6 Thoracic myopathy

.7 Lumbalgia

.8 Radicular syndrome of lower limbs

Excludes sciatic neuritis NOS (353)

.9 Compression syndrome of cauda equina

729 Other diseases of joint

As ICD 738 except peri-arthritis (717)

Other diseases of musculoskeletal system (730-738)

730 Bunion

As ICD 740

731 Synovitis, bursitis and tenosynovitis

As ICD 741 and 742

**732 Infective myositis and other inflammatory diseases
of tendon and fascia**

As ICD 743

733 Other diseases of muscle, tendon and fascia
Excludes inborn defects of muscle (330); myo-
sis (716); myofibrosis (717)

.0 Myasthenia gravis

As ICD 744.0

.1 Muscular atrophy (idiopathic)

.9 Other

Remainder of ICD 744.2

734 Diffuse diseases of connective tissue

Excludes polyarteritis nodosa (446.0)

.0 Progressive systemic sclerosis

.1 Systemic lupus erythematosus

.9 Other

735 Curvature of spine

As ICD 745 except congenital (756.1)

736 Flat foot

As ICD 746 except congenital (755.9)

737 Hallux valgus and varus

As ICD 747 except congenital (755.9)

738 Other deformities

XIV. CONGENITAL ANOMALIES

740 Anencephalus

741 Spina bifida

Excludes spina bifida occulta (756.1)

.0 With hydrocephalus

.9 Without mention of hydrocephalus

742 Congenital hydrocephalus

Excludes the listed conditions with spina bifida
(741.0)

743 Other congenital anomalies of nervous system

.0 Encephalocele

.1 Microcephalus

.2 Other specified anomalies of brain

.3 Other specified anomalies of spinal cord

.4 Neurofibromatosis

.8 Other anomalies of peripheral nervous system

.9 Unspecified anomalies of brain, spinal cord
or nervous system

744 Congenital anomalies of eye

.0 Anophthalmos

.1 Microphthalmos

.2 Buphthalmos

.3 Congenital cataract

.4 Coloboma

.5 Aniridia

.8 Other specified anomalies of eye

.9 Unspecified anomalies of eye

745 Congenital anomalies of ear, face and neck

Excludes: cleft lip (749.1), anomalies of cer-
vical spine (756.1), thyroid gland (758.2),
parathyroid gland (758.3) and larynx (748.3)

.0 Anomalies of ear causing impairment of hear-
ing

.1 Accessory auricle

.2 Other specified anomalies of ear

.3 Unspecified anomalies of ear

.4 Branchial cleft, cyst or fistula; pre-auricular
sinus

.5 Webbing of neck

.8 Other specified anomalies of face and neck

.9 Unspecified anomalies of face and neck

746 Congenital anomalies of heart

- .0 Common truncus
- .1 Transposition of great vessels
- .2 Tetralogy of Fallot
- .3 Ventricular septal defect
- .4 Atrial septal defect
- .5 Ostium atrioventricularare commune
- .6 Anomalies of heart valves
- .7 Fibroelastosis cordis
- .8 Other specified anomalies of heart
- .9 Unspecified anomalies of heart

747 Other congenital anomalies of circulatory system

- .0 Patent ductus arteriosus
- .1 Coarctation of aorta
- .2 Other anomalies of aorta
- .3 Stenosis or atresia of pulmonary artery
- .4 Anomalies of great veins
- .5 Absence or hypoplasia of umbilical artery
- .6 Other anomalies of peripheral vascular system
- .8 Other specified anomalies of circulatory system
- .9 Unspecified anomalies of circulatory system

748 Congenital anomalies of respiratory system

- .0 Choanal atresia
- .1 Other anomalies of nose
- .2 Web of larynx
- .3 Other anomalies of larynx, trachea and bronchus
- .4 Congenital cystic lung
- .5 Agenesis of lung
- .6 Other anomalies of lung
- .8 Other specified anomalies of respiratory system
- .9 Unspecified anomalies of respiratory system

749 Cleft palate and cleft lip

- .0 Cleft palate
- .1 Cleft lip
- .2 Cleft palate with cleft lip

750 Other congenital anomalies of upper alimentary tract

- .0 Tracheoesophageal fistula, oesophageal atresia and stenosis
- .1 Pyloric stenosis
- .2 Anomalies of tongue
- .8 Other specified anomalies of upper alimentary tract
- .9 Unspecified anomalies of upper alimentary tract

751 Other congenital anomalies of digestive system

- .0 Meckel's diverticulum
- .1 Atresia and stenosis of small intestine
- .2 Atresia and stenosis of rectum and anal canal
- .3 Hirschsprung's disease
- .4 Anomalies of intestinal fixation

.5 Other anomalies of intestine

- .6 Anomalies of gallbladder, bile ducts and liver
- .7 Anomalies of pancreas
- .8 Other specified anomalies of digestive system
- .9 Unspecified anomalies of digestive system

752 Congenital anomalies of genital organs

Excludes: male hypogonadism (Klinefelter's syndrome) (759.5), gonadal agenesis (Turner's syndrome) (759.5)

- .0 Indeterminate sex
- .1 Undescended testicle
- .2 Hypospadias
- .3 Epispadias
- .4 Hydrocele
- .5 Anomalies of ovary, Fallopian tube and uterus
- .6 Anomalies of vagina and external female genitalia
- .7 Pseudohermaphroditism
- .8 Other specified anomalies of genital organs
- .9 Unspecified anomalies of genital organs

753 Congenital anomalies of urinary system

- .0 Renal agenesis
- .1 Cystic kidney disease
- .2 Obstructive defects of urinary tract
- .3 Other specified anomalies of kidney
- .4 Other specified anomalies of ureter
- .5 Extrophy of urinary bladder
- .6 Atresia and stenosis of urethra and bladder neck
- .8 Other specified anomalies of bladder and urethra
- .9 Unspecified anomalies of urinary system

754 Congenital clubfoot

755 Other congenital anomalies of limbs

- .0 Polydactyly
- .1 Syndactyly
- .2 Reduction deformity confined to hand
- .3 Reduction deformity of arm (and hand)
- .4 Reduction deformity of leg and foot
- .5 Reduction deformity, unspecified limb
- .6 Other anomaly of upper limb (including shoulder girdle)
- .7 Dislocation of hip
- .8 Other anomaly of lower limb (including pelvic girdle)
- .9 Other and unspecified anomaly of unspecified limb

756 Other congenital anomalies of musculoskeletal system

- .0 Anomalies of skull and face bones
- Excludes anomalies of jaw (524.0)

- .1 Anomalies of spine
- .2 Cervical rib
- .3 Other anomalies of ribs and sternum
- .4 Chondrodyostrophy
- .5 Osteogenesis imperfecta
- .6 Other generalized anomalies of skeleton
- .8 Other specified anomalies of muscle, tendon and fascia
- .9 Unspecified anomalies of musculoskeletal system

- 757 Congenital anomalies of skin, hair and nails
- .0 Hereditary oedema of legs (Milroy's disease)
 - .1 Pigmented naevus
 - .2 Other specified anomalies of skin
 - .3 Specified anomalies of hair
 - .4 Specified anomalies of nails
 - .9 Unspecified anomalies of skin, hair and nails

- 758 Other and unspecified congenital anomalies
- .0 Anomalies of spleen
 - .1 Anomalies of adrenal gland
 - .2 Anomalies of thyroid gland
 - .3 Anomalies of other endocrine glands
 - .8 Other specified congenital anomaly
 - .9 Unspecified congenital anomaly

- 759 Congenital syndromes affecting multiple systems
- .0 Situs inversus
 - .1 Conjoined twins
 - .2 Other forms of monster
 - Excludes anencephaly (740)
 - .3 Langdon-Down disease
 - .4 Other syndromes due to autosomal abnormality
 - .5 Syndromes due to sex chromosome abnormality
 - .6 Tuberous sclerosis
 - .8 Other specified syndromes
 - .9 Multiple congenital anomalies NOS

XV. CERTAIN CAUSES OF PERINATAL MORBIDITY AND MORTALITY

- 760 Chronic circulatory and genito-urinary disease in mother
- Includes the listed conditions with asphyxia, anoxia or hypoxia in the foetus or infant
- .0 Chronic rheumatic heart disease
 - .1 Congenital heart disease
 - .2 Chronic hypertension
 - .3 Other chronic disease of circulatory system
 - .4 Chronic nephritis
 - .5 Other chronic disease of genito-urinary system

- 761 Other maternal conditions unrelated to pregnancy
- Includes the listed conditions with asphyxia, anoxia or hypoxia in the foetus or infant
- .0 Syphilis
 - .1 Diabetes mellitus
 - .2 Influenza
 - .3 Rubella
 - .4 Toxoplasmosis
 - .5 Injury
 - .6 Operation
 - .7 Chemical substances transmitted through placenta
 - .9 Other maternal causes

- 762 Toxaemias of pregnancy
- Includes the listed conditions with asphyxia, anoxia or hypoxia in the foetus or infant
- .0 Renal disease arising during pregnancy
 - .1 Pre-eclampsia of pregnancy
 - .2 Eclampsia of pregnancy
 - .3 Toxaemia unspecified
 - .4 Hyperemesis gravidarum
 - .5 Acute and subacute necrosis of liver arising during pregnancy
 - .9 Other toxæmia of pregnancy

- 763 Maternal ante- and intra-partum infection
- Includes the listed conditions with asphyxia, anoxia or hypoxia in the foetus or infant
- .0 Pyelitis and pyelonephritis of pregnancy
 - .1 Other infections of genito-urinary tract during pregnancy
 - .9 Other

- 764 Difficult labour with abnormality of bones, organs or tissues of pelvis
- .0 With birth injury to brain
 - .1 With birth injury to spinal cord
 - .2 With birth injury to bone or nerve
 - .3 With other or unspecified birth injury
 - .4 With asphyxia, anoxia or hypoxia
 - .9 Without mention of birth injury, asphyxia, anoxia or hypoxia

- 765 Difficult labour with disproportion, but no mention of abnormality of pelvis
- .0 With birth injury to brain
 - .1 With birth injury to spinal cord
 - .2 With birth injury to bone or nerve
 - .3 With other or unspecified birth injury
 - .4 With asphyxia, anoxia or hypoxia
 - .9 Without mention of birth injury, asphyxia, anoxia or hypoxia

766 Difficult labour with malposition of foetus
Excludes the listed conditions with disproportion (765)

- .0 With birth injury to brain
- .1 With birth injury to spinal cord
- .2 With birth injury to bone or nerve
- .3 With other or unspecified birth injury
- .4 With asphyxia, anoxia or hypoxia
- .9 Without mention of birth injury, asphyxia, anoxia or hypoxia

767 Difficult labour with abnormality of forces of labour

- .0 With birth injury to brain
- .1 With birth injury to spinal cord
- .2 With birth injury to bone or nerve
- .3 With other or unspecified birth injury
- .4 With asphyxia, anoxia or hypoxia
- .9 Without mention of birth injury, asphyxia, anoxia or hypoxia

768 Difficult labour with other and unspecified complications

- .0 With birth injury to brain
- .1 With birth injury to spinal cord
- .2 With birth injury to bone or nerve
- .3 With other or unspecified birth injury
- .4 With asphyxia, anoxia or hypoxia
- .9 Without mention of birth injury, asphyxia, anoxia or hypoxia

769 Other complications of pregnancy and child-birth
Includes the listed conditions with asphyxia, anoxia or hypoxia in the foetus or infant

- .0 Incompetent cervix
- .1 Premature rupture of membranes
- .2 Hydramnios
- .3 Ectopic pregnancy
- .4 Multiple pregnancy
- .5 Maternal death unspecified
- .9 Other

770 Conditions of placenta

Includes the listed conditions with asphyxia, anoxia or hypoxia in the foetus or infant

- .0 Placenta praevia
- .1 Premature separation of placenta
- .2 Placental infarction
- .9 Other

771 Conditions of umbilical cord

Includes the listed conditions with asphyxia, anoxia or hypoxia in the foetus or infant

- .0 Compression of cord
- .1 Prolapse of cord without mention of compression
- .9 Other

772 Birth injury without mention of cause

- .0 To brain
- .1 To spinal cord
- .2 To bone or nerve
- .9 Other and unspecified

773 Termination of pregnancy

Not to be used for primary mortality classification if reason for termination is known and is classifiable elsewhere in this section

774 Haemolytic disease of newborn with kernicterus

- .0 With Rh incompatibility
- .1 With ABO incompatibility
- .2 With other or unspecified blood incompatibility
- .9 Without mention of cause

775 Haemolytic disease of newborn without mention of kernicterus

- .0 With Rh incompatibility
- .1 With ABO incompatibility
- .2 With other or unspecified blood incompatibility
- .9 Without mention of cause

776 Anoxic and hypoxic conditions not elsewhere classified

- .0 Aspiration of content of birth canal
- .1 Hyaline membrane disease
- .2 Respiratory distress syndrome
- .3 Foetal distress
- .4 Intra-uterine anoxia
- .9 Asphyxia of newborn unspecified

777 Immaturity NOS

778 Other conditions of foetus

- .0 Foetal blood loss before birth
- .1 Chorio-amnionitis
- .2 Post-maturity
- .3 Haemorrhagic disease of newborn
- .4 Cold injury syndrome
- .9 Other

779 Foetal death of unknown cause

- .0 Maceration
- .9 Other

XVI. SYMPTOMS AND ILL-DEFINED CONDITIONS

There had not been a document prepared on the revision of the section as its form is dependent to some extent on the final arrangement and content of the disease sections I-XV. A separate three-digit category will be provided for 795.2 sudden death (cause unknown).

Certain transfers may already be considered accepted, either of sub-categories or of inclusion terms. Transfers of sub-categories from Section XVI involve ICD 780.3 Jacksonian epilepsy (to Section VI), ICD 785.6 Diarrhoea, age two years and over (to Section I, without age distinction); ICD 787.5 Pain in back (to Section XIII). In respect of inclusion terms it has been agreed to reclassify "Cerebellar ataxia" (from ICD 780.5 Disturbance of co-ordination, to Section VI); "Narcolepsy" (from ICD 780.7 Disturbance of sleep, to Section VI). Transfers into Section XVI affect ICD 534 Toothache from unspecified cause, and inclusion term "Earache of unknown cause" in ICD 394 Other inflammatory diseases of ear. Other transfers have been suggested such as that of ICD 784.6 Excessive salivation (to Section IX) or of ICD 789.1 Albuminuria orthostatic (to Section X). However, only systematic review of all terms in the present alphabetical index assigned to Section XVI as well as other sections will allow conclusions on the merits of a few additional transfers and facilitate consistent decisions.

E XVII. ACCIDENTS, POISONINGS AND VIOLENCE (EXTERNAL CAUSE)

Railway accidents (E800-E807)

To identify the injured person, the following fourth digits are for use with categories E800-E807:

- .0 Railway employee
- .1 Passenger on railway
- .2 Pedestrian
- .3 Pedal cyclist
- .8 Other specified person
- .9 Unspecified person

E800 Railway accident involving collision with rolling stock

E801 Railway accident involving collision with stationary object

E802 Railway accident involving derailment without antecedent collision

E803 Railway accident involving explosion, fire, burning

E804 Fall in, on, or from train

E805 Hit by rolling stock

E806 Other specified railway accident

E807 Railway accident of unspecified nature

Motor vehicle traffic accidents (E810-E819)

To identify the injured person, the following fourth digits are for use with categories E810-E819:

- .0 Driver of motor vehicle other than motorcycle
- .1 Passenger in motor vehicle other than motorcycle
- .2 Motorcyclist
- .3 Passenger on motorcycle
- .4 Occupant of streetcar
- .5 Rider of animal; occupant of animal-drawn vehicle
- .6 Pedal cyclist
- .7 Pedestrian
- .8 Other specified person
- .9 Unspecified person

E810 Motor vehicle traffic accident involving collision with train

E811 Motor vehicle traffic accident involving collision with streetcar

E812 Motor vehicle traffic accident involving collision with another motor vehicle

E813 Motor vehicle traffic accident involving collision with other vehicle

E814 Motor vehicle traffic accident involving collision with pedestrian

E815 Other motor vehicle traffic accident involving collision

E816 Non-collision motor vehicle traffic accident due to loss of control

E817 Non-collision motor vehicle traffic accident while boarding or alighting

E818 Other non-collision motor vehicle traffic accident

E819 Motor vehicle traffic accident of unspecified nature

Motor vehicle non-traffic accidents (E820-E823)

To identify the injured person the following fourth digits are for use with categories E820-E823:

- .0 Driver of motor vehicle other than motorcycle
- .1 Passenger in motor vehicle other than motorcycle
- .2 Motorcyclist
- .3 Passenger on motorcycle

E850 Accidental poisoning by antibiotics and other anti-infectives

- .0 Penicillin, any
- .1 Antifungal antibiotics
- .2 Chloramphenicol
- .3 Erythromycins, streptomycins, tetracyclines
- .4 Other antibiotics
- .5 Sulfonamides
- .6 Arsenic anti-infectives
- .7 Silver and its compounds
- .8 Quinoline and hydroxyquinoline derivatives
- .9 Other anti-infectives

E851 Accidental poisoning by hormones and synthetic substitutes

- .0 Adrenals
- .1 Androgens and anabolic congeners
- .2 Oestrogens
- .3 Insulins and antidiabetic agents
- .4 Anterior pituitary extracts
- .5 Posterior pituitary extracts
- .6 Progestogens
- .7 Thyroid and thyroid derivatives
- .8 Antithyroid agents
- .9 Other hormones and synthetic substitutes

E852 Accidental poisoning by primarily systemic and haematologic agents

- .0 Antihistamine and anti-emetic drugs
- .1 Antineoplastic agents
- .2 Other electrolytic, caloric and water balance agents
- .3 Vitamins
- .4 Other primarily systemic agents
- .5 Iron and its compounds
- .6 Anticoagulants
- .7 Vitamin K products
- .8 Other coagulants
- .9 Other primarily haematologic agents

E853 Accidental poisoning by analgesics and antipyretics

- .0 Opiates and synthetic analogues
- .1 Salicylates and congeners
- .2 Cinchophen and congeners
- .3 Colchicine
- .4 Aniline derivatives
- .8 Other coal tar derivatives
- .9 Other analgesics and antipyretics

E854 Accidental poisoning by other sedatives and hypnotics

- .0 Barbiturates
- .1 Chloral hydrate
- .2 Paraldehyde
- .3 Bromides
- .9 Other sedatives and hypnotics

E855 Accidental poisoning by autonomic nervous system and psychotherapeutic drugs

- .0 Antidepressants
- .1 Tranquillizers
- .2 Other psychotherapeutic agents
- .3 Parasympathomimetics (cholinergics)
- .4 Parasympatholytics (anticholinergics)
- .5 Sympathomimetics (adrenergics)
- .6 Autonomic nervous system relaxants
- .9 Other

E856 Accidental poisoning by other central nervous system depressants and stimulants

- .0 Anticonvulsants
- .1 Skeletal muscle relaxants
- .2 Anaesthetic gases
- .3 Other CNS depressants
- .4 Amphetamine
- .8 Other CNS stimulants
- .9 Other and unspecified

E857 Accidental poisoning by cardiovascular drugs

- .0 Cardiac depressants
- .1 Cardiac tonics
- .2 Cholesterol lowering agents
- .3 Ganglionic blocking agents
- .4 Vasodilators
- .5 Other hypotensive agents
- .6 Sclerosing agents
- .9 Other

E858 Accidental poisoning by gastro-intestinal drugs

- .0 Antacids and antidiarrhoeal agents
- .1 Intestinal irritant cathartics
- .2 Emollient cathartics
- .3 Saline cathartics
- .4 Faecal softeners
- .5 Other cathartics
- .6 Emetics
- .9 Other

E859 Accidental poisoning by other and unspecified drugs and medicaments

- .0 Local anaesthetics
- .1 Mercurial diuretics
- .2 Xanthine derivatives
- .3 Other diuretics
- .4 Agents acting directly on musculo-skeletal system
- .5 Liniments
- .6 Ointments
- .7 Other medicinals for external use
- .8 Other specified drugs
- .9 Drug NOS

<i>Accidental poisoning by other solid and liquid substances (E860-E869)</i>	E876 Accidental poisoning by other gases and vapors As ICD E893 and E894
Excludes (contact) dermatitis due to detergents (692.0), oils and greases (692.1), solvents (692.2), and other chemicals (692.4)	
E860 Accidental poisoning by alcohol As ICD E880	
E861 Accidental poisoning by cleansing and polishing agents	
E862 Accidental poisoning by disinfectants	<i>Accidental falls (E880-E887)</i>
E863 Accidental poisoning by paints and varnishes	E880 Fall on or from stairs or steps
E864 Accidental poisoning by petroleum products and other solvents As ICD E881 and E882	E881 Fall on or from ladders or scaffolding
E865 Accidental poisoning by pesticides, fertilizers, plant foods	E882 Fall from or out of building or other structure
E866 Accidental poisoning by heavy metals and their fumes	E883 Fall into hole or other opening in surface
E867 Accidental poisoning by corrosives and caustics, not elsewhere classified	E884 Other fall from one level to another
E868 Accidental poisoning by noxious foodstuffs and poisonous plants	E885 Fall on same level from slipping, tripping or stumbling
E869 Accidental poisoning by other and unspecified solid and liquid substances	E886 Fall on same level from collision, pushing or shoving by or with other person
<i>Accidental poisoning by gases and vapors (E870-E877)</i>	E887 Other and unspecified fall
E870 Accidental poisoning by gas distributed by pipeline	<i>Accidents caused by fires (E890-E899)</i>
E871 Accidental poisoning by liquified petroleum gas distributed in mobile containers	E890 Accident caused by conflagration in private dwelling
E872 Accidental poisoning by other utility gas	E891 Accident caused by conflagration in other building or structure
E873 Accidental poisoning by motor vehicle exhaust gas As ICD E891	E892 Accident caused by conflagration not in building or structure
E874 Accidental poisoning by carbon monoxide from incomplete combustion of domestic fuels	E893 Accident caused by ignition of clothing
E875 Accidental poisoning by other carbon monoxide	E894 Accident caused by ignition of highly inflammable material
	E895 Accident caused by controlled fire in private dwelling
	E896 Accident caused by controlled fire in other building or structure
	E897 Accident caused by controlled fire not in building or structure
	E898 Accident caused by other specified fires
	E899 Accident caused by unspecified fire

*Accidents due to natural and environmental factors
(E900-E909)*

E900 Excessive heat

As ICD E931 except sunburn (692.8)

E901 Excessive cold

As ICD E932

E902 High and low air pressure

As ICD E930

E903 Effects of travel and motion

E904 Hunger, thirst, exposure and neglect

As ICD E926 and E933

E905 Bites and stings of venomous animals and insects

As ICD E927

E906 Other accidents caused by animals

As ICD E928

E907 Lightning

As ICD E935

E908 Cataclysm

As ICD E934

E909 Accident due to other natural and environmental factors

Other accidents (E910-E929)

E910 Accidental drowning and submersion

Excludes drowning and submersion in transport accidents

.0 In recreational activities

.9 Other and unspecified

E911 Inhalation and ingestion of food causing obstruction or suffocation

As ICD E921

E912 Inhalation and ingestion of other object causing obstruction or suffocation

As ICD E922

E913 Accidental mechanical suffocation

.0 In bed or cradle

As ICD E924

.9 Other and unspecified

As ICD E925

E914 Foreign body entering accidentally eye and adnexa

As ICD E920

E915 Foreign body entering accidentally other orifice
As ICD E923

E916 Struck accidentally by falling object

E917 Striking against or struck accidentally by objects

E918 Caught accidentally in or between objects

E919 Over-exertion and strenuous movements

E920 Accident caused by cutting or piercing instruments
As ICD E913 with sub-divisions:

.0 Powered hand tools

.1 Other hand tools

.2 Other machinery

.8 Other

.9 Unspecified

E921 Accident caused by explosion of pressure vessel
As ICD E915 with sub-divisions:

.0 Boilers

.1 Gas cylinders

.8 Other

.9 Unspecified

E922 Accident caused by firearms weapons
As ICD E919 with sub-divisions:

.0 Accidentally self-inflicted

.9 Other and unspecified

E923 Accident caused by explosive material

.0 Fireworks

.1 Blasting materials

.2 Explosive gases

.8 Other

.9 Unspecified

E924 Accident caused by hot substance, corrosive liquid, and steam

As ICD E917 except burns NOS (E899)

E925 Accident caused by electric current
As ICD E914 with sub-divisions:

.0 Home wiring or appliances

.1 Industrial wiring or appliances

.8 Other

.9 Unspecified

E926 Accident caused by radiation

As ICD E918 with sub-divisions:

.0 Non-ionizing

.1 Ionizing

- E927 Vehicle accidents not elsewhere classifiable
- E928 Machinery accidents not elsewhere classifiable
- E929 Other and unspecified accidents
- Surgical and medical complications and misadventures (E930-E936)*
- Excludes (contact) dermatitis due to drugs and medicaments (692.3) and accidental overdose of drugs and wrong drug given in error (E850-E859)
- E930 Complications and misadventures in operative therapeutic procedures
Not to be used for primary death classification if the condition for which the treatment was given is known
- .0 In surgical treatment, excluding effects of anaesthetic management
 - .1 In anaesthesia during operative treatment
 - .2 In infusion or transfusion during operative treatment
 - .9 In other procedures during operative treatment
- E931 Complications and misadventures in other and unspecified therapeutic procedures
Not to be used for primary death classification if the condition for which treatment was given is known
- .0 In use of X-rays and radioactive substances
 - .1 In administration of drugs and biologicals
 - .2 In infusion and transfusion
 - .3 In local applications
 - .8 In other therapeutic procedures
 - .9 In unspecified therapeutic procedures
- E932 Complications and misadventures in diagnostic procedures
Not to be used for primary death classification if a diagnosis was made
- .0 In surgical procedures, excluding effects of anaesthetic management
 - .1 In anaesthesia
 - .2 In use of X-rays or radioactive substances
 - .3 In administration of drugs and biologicals
 - .8 In other diagnostic procedures
 - .9 In unspecified diagnostic procedures
- E933 Complications and misadventures in prophylaxis with bacterial vaccines
- .0 BCG vaccine
 - .1 Typhoid and paratyphoid vaccine
 - .2 Cholera vaccine
 - .3 Plague vaccine
 - .4 Tetanus vaccine
- .5 Diphtheria vaccine
- .6 Pertussis vaccine, including combinations with a pertussis component
- .8 Other and unspecified bacterial vaccines
- .9 Mixed bacterial vaccine, except combinations with a pertussis component
- E934 Complications and misadventures in prophylaxis with other vaccines
- .0 Smallpox vaccine
 - .1 Rabies vaccine
 - .2 Typhus vaccine
 - .3 Yellow fever vaccine
 - .4 Measles vaccine
 - .5 Poliomyelitis vaccine
 - .6 Other and unspecified viral or rickettsial vaccines
 - .7 Mixed viral/rickettsial and bacterial vaccines, except combinations with a pertussis component
 - .9 Other and unspecified vaccines
- E935 Complications and misadventures in other prophylactic procedures
- .0 In surgical procedures, excluding effects of anaesthetic management
 - .1 In anaesthesia during prophylactic procedures
 - .2 In use of X-rays and radioactive substances
 - .3 In administration of drugs and biologicals
 - .9 In other and unspecified prophylactic procedures
- E936 Complications and misadventures in other non-therapeutic procedures
- .0 In surgical procedures, excluding effects of anaesthetic management
 - .1 In anaesthesia
 - .9 In other and unspecified procedures
- Late effects of accidental injury (E940-E949)*
- E940 Late effect of motor vehicle accident
- E941 Late effect of other transport accident
- E942 Late effect of accidental poisoning
- E943 Late effect of accidental fall
- E944 Late effect of accident caused by fire
- E945 Late effect of accident due to natural and environmental factors
- E946 Late effect of other accident

E947 Late effect of surgical operation	E960 Fight, brawl, rape Excludes · strangulation (E963), submersion (E964), and injuries caused by weapons (E965, E966)
E948 Late effect of irradiation	
E949 Late effect of other surgical and medical procedures	
<i>Suicide and self-inflicted injury (E950-E959)</i>	
Categories E950-E959 include injuries in suicide and attempted suicide and other self-inflicted injuries when specified as intentional. Suicide said to be "due to" any disease is to be classified as suicide	
E950 Suicide and self-inflicted poisoning by solid or liquid substances As ICD E970, E971	E961 Assault by corrosive or caustic substance, except poisoning
E951 Suicide and self-inflicted poisoning by gases in domestic use As ICD E972	E962 Assault by poisoning As ICD E980
E952 Suicide and self-inflicted poisoning by other gases As ICD E973	E963 Assault by hanging and strangulation
E953 Suicide and self-inflicted injury by hanging and strangulation As ICD E974	E964 Assault by submersion (drowning)
E954 Suicide and self-inflicted injury by submersion (drowning) As ICD E975	E965 Assault by firearms and explosives As ICD E981
E955 Suicide and self-inflicted injury by firearms and explosives As ICD E976	E966 Assault by cutting and piercing instruments As ICD E982
E956 Suicide and self-inflicted injury by cutting and piercing instruments As ICD E977	E967 Assault by pushing from high place
E957 Suicide and self-inflicted injury by jumping from high place As ICD 978	E968 Assault by other and unspecified means
E958 Suicide and self-inflicted injury by other and unspecified means As ICD E979	E969 Late effect of injury purposely inflicted by other person As ICD E964
E959 Late effect of suicide and self-inflicted injury As ICD E963	<i>Legal intervention (E970-E978)</i> Categories E970-E979 include injuries during legal action by police or other law-enforcing agents, including military on duty
<i>Homicide and injury purposely inflicted by other persons (E960-E969)</i>	E970 Injury due to legal intervention by firearms
Categories E960-E969 exclude injuries due to legal intervention (E970-E979) and to war operations (E990-E999)	E971 Injury due to legal intervention by explosives
	E972 Injury due to legal intervention by gas
	E973 Injury due to legal intervention by blunt object
	E974 Injury due to legal intervention by cutting and piercing instruments
	E975 Injury due to legal intervention by other specified means
	E976 Injury due to legal intervention by unspecified means
	E977 Late effect of injuries due to legal intervention
	E978 Legal execution

Injury undetermined whether accidentally or purposely inflicted (E980-E989)

Categories E980-E989 are for use when it is not determined whether the injuries were accidental, suicidal or homicidal. They include self-inflicted injuries not specified either as accidental or as intentional

E980 Poisoning by solid or liquid substances, undetermined whether accidentally or purposely inflicted

E981 Poisoning by gases in domestic use, undetermined whether accidentally or purposely inflicted

E982 Poisoning by other gases, undetermined whether accidentally or purposely inflicted

E983 Hanging and strangulation, undetermined whether accidentally or purposely inflicted

E984 Submersion (drowning), undetermined whether accidentally or purposely inflicted

E985 Injury by firearms and explosives, undetermined whether accidentally or purposely inflicted

E986 Injury by cutting and piercing instruments, undetermined whether accidentally or purposely inflicted

E987 Falling from high place, undetermined whether accidentally or purposely inflicted

E988 Injury by other and unspecified means, undetermined whether accidentally or purposely inflicted

E989 Late effect of injury, undetermined whether accidentally or purposely inflicted

Injury resulting from operations of war (E990-E999)

Categories E990-E999 include injuries caused by war and civil insurrections, but exclude accidents during training of military personnel, manufacture of war material and transport, unless attributable to enemy action. Injuries by explosion of bombs and mines placed during the war, if the explosion occurred after cessation of hostilities, are included in category E998

E990 Injury due to war operations by fires and conflagrations

E991 Injury due to war operations by bullets and fragments

E992 Injury due to war operations by explosion of marine weapons

E993 Injury due to war operations by other explosion

E994 Injury due to war operations by destruction of aircraft
As ICD E997

E995 Injury due to war operations by other and unspecified forms of conventional warfare
As ICD E998

E996 Injury due to war operations by nuclear weapons

E997 Injury due to war operations by other forms of unconventional warfare

E998 Injuries due to war operations but occurring after cessation of hostilities
As ICD E999

E999 Late effect of injury due to war operations
As ICD E965

**N XVII. ACCIDENTS, POISONINGS AND VIOLENCE
(NATURE OF INJURY, N800-N999)**

FRACTURES (N800-N829)

The following fourth digits are applicable for categories N800-N829 unless otherwise indicated:

- .0 Closed fracture
- .1 Open fracture
- .9 Late effect

Fracture of skull, spine, and trunk (N800-N809)

N800 Fracture of vault of skull

N801 Fracture of base of skull

N802 Fracture of face bones

- .0 Nasal bones, closed
- .1 Nasal bones, open
- .2 Mandible, closed
- .3 Mandible, open
- .4 Other, closed
- .5 Other, open
- .9 Late effect, any facial bones

N803 Other and unqualified skull fractures

N804 Multiple fractures involving skull or face with other bones

N805 Fracture and fracture dislocation of vertebral column without mention of spinal cord lesion

- .0 Cervical, closed
- .1 Cervical, open

- .2 Dorsal or thoracic, closed
- .3 Dorsal or thoracic, open
- .4 Lumbar, closed
- .5 Lumbar, open
- .6 Sacrum and coccyx, closed
- .7 Sacrum and coccyx, open
- .8 Late effect, any vertebra

N806 Fracture and fracture dislocation of vertebral column with spinal cord lesion

Excludes: spinal cord lesion without fracture
(N958)

- .0 Cervical, closed
- .1 Cervical, open
- .2 Dorsal or thoracic, closed
- .3 Dorsal or thoracic, open
- .4 Lumbar, closed
- .5 Lumbar, open
- .6 Sacrum and coccyx, closed
- .7 Sacrum and coccyx, open
- .9 Late effect, any vertebra

N807 Fracture of rib(s), sternum and larynx

- .0 Rib, closed
- .1 Rib, open
- .2 Sternum, closed
- .3 Sternum, open
- .4 Larynx, closed
- .5 Larynx, open
- .9 Late effect, rib(s), sternum or larynx

N808 Fracture of pelvis

N809 Multiple and ill-defined fractures of trunk

Fracture of upper limb (N810-N819)

N810 Fracture of clavicle

N811 Fracture of scapula

N812 Fracture of humerus

- .0 Upper extremity, closed
- .1 Upper extremity, open
- .2 Shaft, or unspecified part, closed
- .3 Shaft, or unspecified part, open
- .4 Lower extremity, closed
- .5 Lower extremity, open
- .9 Late effect, any part

N813 Fracture of radius and ulna (either or both)

- .0 Upper extremity or unspecified part, closed
- .1 Upper extremity or unspecified part, open
- .2 Shaft, closed
- .3 Shaft, open
- .4 Lower extremity, closed

- .5 Lower extremity, open
- .9 Late effect, any part

N814 Fracture of carpal bone(s)

N815 Fracture of metacarpal bone(s)

N816 Fracture of one or more phalanges of hand

N817 Multiple fractures of hand bones

N818 Other, multiple, and ill-defined fractures of upper limb

N819 Multiple fractures both upper limbs, and upper limb with rib(s) and sternum

Fracture of lower limb (N820-N829)

N820 Fracture of neck of femur

N821 Fracture of other and unspecified parts of femur

- .0 Shaft or unspecified part, closed
- .1 Shaft or unspecified part, open
- .2 Lower extremity, closed
- .3 Lower extremity, open
- .9 Late effect, either part

N822 Fracture of patella

N823 Fracture of tibia and fibula (either or both)

- .0 Upper extremity or unspecified part, closed
- .1 Upper extremity or unspecified part, open
- .2 Shaft, closed
- .3 Shaft, open
- .9 Late effect, either part

N824 Fracture of ankle

N825 Fracture of one or more tarsal and metatarsal bones

N826 Fracture of one or more phalanges of foot

N827 Other, multiple, and ill-defined fractures of lower limb

N828 Multiple fractures involving both lower limbs, lower with upper limb, and lower limb(s) with rib(s) and sternum

N829 Fracture of unspecified bones

DISLOCATION WITHOUT FRACTURE (N830-N839)

Excludes: congenital dislocation (755, 756)
fracture dislocation (N800-N829)

recurrent or pathological dislocation
(729)

The following fourth digits are applicable for categories N830-N839 unless otherwise indicated:

- .0 Simple dislocation
- .1 Compound dislocation
- .9 Late effect

N830 Dislocation of jaw

N831 Dislocation of shoulder

N832 Dislocation of elbow

N833 Dislocation of wrist

N834 Dislocation of finger

N835 Dislocation of hip

N836 Dislocation of knee

N837 Dislocation of ankle

N838 Dislocation of foot

N839 Other, multiple, and ill-defined dislocations

- .0 Cervical vertebra, simple
- .1 Cervical vertebra, compound
- .5 Other location, simple
- .6 Other location, compound
- .7 Multiple and ill-defined, simple
- .8 Multiple and ill-defined, compound
- .9 Late effect, cervical vertebra or other

SPRAINS AND STRAINS OF JOINTS AND ADJACENT MUSCLES (N840-N848)

Excludes: tear, rupture or laceration of muscle associated with open wound (N870-N908)

N840 Sprains and strains of shoulder and upper arm

N841 Sprains and strains of elbow and forearm

N842 Sprains and strains of wrist and hand

N843 Sprains and strains of hip and thigh

N844 Sprains and strains of knee and leg

N845 Sprains and strains of ankle and foot

N846 Sprains and strains of sacro-iliac region

N847 Sprains and strains of other and unspecified parts of back

- .0 Neck
- .8 Other
- .9 Unspecified

N848 Other and ill-defined sprains and strains

INTRACRANIAL INJURY (EXCLUDING THOSE WITH SKULL FRACTURE) (N850-N854)

Excludes: nerve injury (N950, N951)

The following fourth digits are applicable for categories N850-N854 unless otherwise indicated:

- .0 Without mention of open intracranial wound
- .1 With open intracranial wound
- .9 Late effect

N850 Concussion

- .0 Current or unspecified
- .9 Late effect

N851 Cerebral laceration and contusion

N852 Subarachnoid, subdural and extradural haemorrhage, following injury (without mention of cerebral laceration or contusion)

N853 Other and unspecified intracranial haemorrhage following injury (without mention of cerebral laceration or contusion)

N854 Intracranial injury of other and unspecified nature

INTERNAL INJURY OF CHEST, ABDOMEN AND PELVIS (N860-N869)

Excludes: foreign body entering through orifice (N934-N939)

N860 Traumatic pneumothorax and haemothorax

- .0 Without mention of open wound into thorax
- .1 With open wound into thorax
- .9 Late effect

N861 Injury to heart and lung

- .0 Heart without mention of open wound into thorax
- .1 Heart with open wound into thorax
- .2 Lung without mention of open wound into thorax
- .3 Lung with open wound into thorax
- .9 Late effect, either organ

N862 Injury to other and unspecified intrathoracic organs

- .0 Without mention of open wound into thorax
- .1 With open wound into thorax
- .9 Late effect

N863 Injury to gastro-intestinal tract

- .0 Without mention of open wound into abdominal cavity
- .1 With open wound into abdominal cavity
- .9 Late effect

N864 Injury to liver

- .0 Without mention of open wound into abdominal cavity
- .1 With open wound into abdominal cavity
- .9 Late effect

N865 Injury to spleen

- .0 Without mention of open wound into abdominal cavity
- .1 With open wound into abdominal cavity
- .9 Late effect

N866 Injury to kidney

- .0 Without mention of open wound into abdominal cavity
- .1 With open wound into abdominal cavity
- .9 Late effect

N867 Injury to pelvic organs

- .0 Without mention of open wound into abdominal cavity
- .1 With open wound into abdominal cavity
- .9 Late effect

N868 Injury to other and unspecified intra-abdominal organs

- .0 Without mention of open wound into abdominal cavity
- .1 With open wound into abdominal cavity
- .9 Late effect

N869 Internal injury, unspecified or involving intrathoracic and intra-abdominal organs

- .0 Without mention of open wound into thoracic or abdominal cavity
- .1 With open wound into thoracic or abdominal cavity
- .9 Late effect

LACERATION AND OPEN WOUND (N870-N908)

Excludes: burn (N940-N949)

crushing without open wound
(N920-N929)

foreign body entering through orifice
(N930-N939)

late amputation stump complication
(following surgical amputation)
(N998.1)

superficial injury (N910-N918)

that incidental to:

cerebral injury (N850-N854)
dislocation (N830-N839)
fracture (N800-N829)
internal injury (N860-N869)
nerve injury (N950-N959)

*Laceration and open wound of head, neck and trunk
(N870-N879)*

N870 Open wound of eye and orbit

- .0 Without mention of complication
- .1 Complicated
- .9 Late effect

N871 Enucleation of eye

N872 Open wound of ear

- .0 Without mention of complication
- .1 Complicated
- .9 Late effect

N873 Other and unspecified laceration of head

- .0 Scalp without mention of complication
- .1 Scalp complicated
- .2 Nose without mention of complication
- .3 Nose complicated
- .7 Other face without mention of complication
- .8 Other face complicated
- .9 Late effect, nose, other face and scalp

N874 Open wound of neck

- .0 Without mention of complication
- .1 Complicated
- .9 Late effect

N875 Open wound of chest (wall)

- .0 Without mention of complication
- .1 Complicated
- .9 Late effect

N876 Open wound of back

- .0 Without mention of complication
- .1 Complicated
- .9 Late effect

N877 Open wound of buttock		N885 Traumatic amputation of thumb (complete) (partial)
.0 Without mention of complication		.0 Without mention of complication
.1 Complicated		.1 Complicated
.9 Late effect		.9 Late effect
N878 Open wound of genital organs (external) including traumatic amputation		N886 Traumatic amputation of other finger(s) (complete) (partial)
.0 Without mention of complication		.0 Without mention of complication
.1 Complicated		.1 Complicated
.9 Late effect		.9 Late effect
N879 Other, multiple and unspecified open wounds of head, neck and trunk		N887 Traumatic amputation of arm and hand (complete) (partial)
.0 Other specified sites of trunk without mention of complication		.0 Without mention of complication
.1 Other specified sites of trunk complicated		.1 Complicated
.7 Multiple and unspecified sites without mention of complication		.9 Late effect
.8 Multiple and unspecified sites complicated		
.9 Late effect, other specified, multiple and unspecified sites		
<i>Laceration and open wound of upper limb (N880-N887)</i>		
N880 Open wound of shoulder and upper arm		N890 Open wound of hip and thigh
.0 Without mention of complication		.0 Without mention of complication
.1 Complicated		.1 Complicated
.2 With tendon involvement		.2 With tendon involvement
.9 Late effect		.9 Late effect
N881 Open wound of elbow, forearm and wrist		N891 Open wound of knee, leg (except thigh) and ankle
.0 Without mention of complication		.0 Without mention of complication
.1 Complicated		.1 Complicated
.2 With tendon involvement		.2 With tendon involvement
.9 Late effect		.9 Late effect
N882 Open wound of hand(s) except finger(s) alone		N892 Open wound of foot except toe(s) alone
.0 Without mention of complication		.0 Without mention of complication
.1 Complicated		.1 Complicated
.2 With tendon involvement		.2 With tendon involvement
.9 Late effect		.9 Late effect
N883 Open wound of finger(s)		N893 Open wound of toe(s)
.0 Without mention of complication		.0 Without mention of complication
.1 Complicated		.1 Complicated
.2 With tendon involvement		.2 With tendon involvement
.9 Late effect		.9 Late effect
N884 Multiple and unspecified open wound of upper limb		N894 Multiple and unspecified open wound of lower limb
.0 Without mention of complication		.0 Without mention of complication
.1 Complicated		.1 Complicated
.2 With tendon involvement		.2 With tendon involvement
.9 Late effect		.9 Late effect
<i>Laceration and open wound of lower limbs (N890-N897)</i>		
N885 Traumatic amputation of thumb (complete) (partial)		N895 Traumatic amputation of toe(s) (complete) (partial)
.0 Without mention of complication		.0 Without mention of complication
.1 Complicated		.1 Complicated
.9 Late effect		.9 Late effect

N896 Traumatic amputation of foot (complete) (partial)	.2 With tendon involvement .9 Late effect
.0 Without mention of complication	
.1 Complicated	
.9 Late effect	
N897 Traumatic amputation of leg(s) (complete) (partial)	
.0 Without mention of complication	
.1 Complicated	
.9 Late effect	
<i>Laceration and open wounds of multiple location (N900-N908)</i>	
N900 Multiple open wounds of both upper limbs	
.0 Without mention of complication	
.1 Complicated	
.2 With tendon involvement	
.9 Late effect	
N901 Multiple open wounds of both lower limbs	
.0 Without mention of complication	
.1 Complicated	
.2 With tendon involvement	
.9 Late effect	
N902 Multiple open wounds of both upper and lower limb(s)	
.0 Without mention of complication	
.1 Complicated	
.2 With tendon involvement	
.9 Late effect	
N903 Multiple open wounds of both hands	
.0 Without mention of complication	
.1 Complicated	
.2 With tendon involvement	
.9 Late effect	
N904 Multiple open wounds of both head and limb(s)	
.0 Without mention of complication	
.1 Complicated	
.2 With tendon involvement	
.9 Late effect	
N905 Multiple open wounds of both head and trunk	
.0 Without mention of complication	
.1 Complicated	
.2 With tendon involvement	
.9 Late effect	
N906 Multiple open wounds of both trunk and limb(s)	
.0 Without mention of complication	
.1 Complicated	
N907 Multiple open wounds of face and other sites	
.0 Without mention of complication	
.1 Complicated	
.2 With tendon involvement	
.9 Late effect	
N908 Multiple open wounds of other and unspecified location	
.0 Without mention of complication	
.1 Complicated	
.9 Late effect	
SUPERFICIAL INJURY (N910-N918)	
Excludes: burn (N940-N949) contusion (N920-N929) insect bite, venomous (N989.4)	
The following fourth digits are applicable to categories N910-N918 unless otherwise indicated:	
.0 Without mention of infection	
.1 Infected	
N910 Superficial injury of face, neck, scalp	
N911 Superficial injury of trunk	
N912 Superficial injury of shoulder and upper arm	
N913 Superficial injury of elbow, forearm and wrist	
N914 Superficial injury of hand(s) except finger(s) alone	
N915 Superficial injury of finger(s)	
N916 Superficial injury of hip, thigh, leg and ankle	
N917 Superficial injury of foot and toe(s)	
N918 Superficial injury of other, multiple and unspecified sites	
CONTUSION AND CRUSHING WITH INTACT SKIN SURFACE (N920-N929)	
Excludes: concussion (N850, N860-N869) that incidental to: cerebral injury (N850-N854) dislocation (N830-N839) fracture (N800-N829) internal injury (N860-N869) nerve injury (N950-N959)	

N920 Contusion of face, scalp, and neck except eye(s)	lightning (N994.0) radiation other than burn (N990)
N921 Contusion of eye and orbit	The following fourth digits are applicable to categories N940-N949 unless otherwise indicated:
N922 Contusion of trunk	.0 Burn, unspecified degree, without mention of complication .1 Burn, first degree, without mention of complication .2 Burn, second degree, without mention of complication .3 Burn, third degree, without mention of complication .8 Complicated burn .9 Late effect
N923 Contusion of shoulder and upper arm	
N924 Contusion of elbow, forearm and wrist	
N925 Contusion of hand(s) except finger(s) alone	
N926 Contusion of finger(s)	
N927 Contusion of hip, thigh, leg and ankle	
N928 Contusion of foot and toe(s)	
N929 Contusion of other, multiple and unspecified sites	
FOREIGN BODY ENTERING THROUGH ORIFICE (N930-N939)	
Excludes: foreign body in open wound (N800-N839, N851-N908) foreign body inadvertently left in operation wound (N998.6)	
N930 Foreign body in eye and adnexa	
N931 Foreign body in ear	
N932 Foreign body in nose	
N933 Foreign body in pharynx and larynx	
N934 Foreign body in bronchus and lung	
N935 Foreign body in mouth, oesophagus, stomach	
N936 Intestine and colon	
N937 Anus and rectum	
N938 Digestive system, unspecified	
N939 Foreign body in genito-urinary tract	
BURN (N940-N949)	
Excludes: blister (N910-N918) burn due to swallowing corrosive substance (N983) effect of: electricity (N995.6)	
	The following fourth digits are applicable for categories N950-N959 unless otherwise indicated:
	.0 Injury to nerve, without mention of open wound .1 Injury to nerve, with open wound .9 Late effect
	N950 Injury to optic nerve(s)
	N951 Injury to other cranial nerve(s)
	N952 Injury to nerve(s) in upper arm
	N953 Injury to nerve(s) in forearm
	N954 Injury to nerve(s) in wrist and hand
	N955 Injury to nerve(s) in thigh

- N956 Injury to nerve(s) in lower leg
- N957 Injury to nerve(s) in ankle and foot
- N958 Spinal cord lesion without evidence of spinal bone injury
- .0 Cervical without mention of open wound
 - .1 Cervical with open wound
 - .2 Dorsal or thoracic without mention of open wound
 - .3 Dorsal or thoracic with open wound
 - .4 Lumbar without mention of open wound
 - .5 Lumbar with open wound
 - .7 Sacral without mention of open wound
 - .8 Sacral with open wound
 - .9 Late effect, any part
- N959 Other nerve injury including nerve injury in several parts
- .0 Cervical sympathetic without mention of open wound
 - .1 Cervical sympathetic with open wound
 - .6 Other and in several parts without mention of open wound
 - .7 Other and in several parts with open wound
 - .9 Late effect, either
- ADVERSE EFFECTS OF CHEMICAL SUBSTANCES (N960-N989)**
- Excludes: dermatitis due to contact (692)
external chemical burns (N940-N949)*
- Adverse effect of medicinal agents (N960-N979)*
- N960 Adverse effect of antibiotics
- .0 Penicillin, any
 - .1 Antifungal antibiotics
 - .2 Chloramphenicol
 - .3 Erythromycins
 - .4 Streptomycins
 - .5 Tetracyclines
 - .9 Other antibiotics
- N961 Adverse effect of other anti-infectives
- .0 Sulfonamides
 - .1 Arsenic anti-infectives
 - .2 Silver and its compounds
 - .3 Quinoline and hydroxyquinoline derivatives
 - .9 Other anti-infectives
- N962 Adverse effect of hormones and synthetic substitutes
- .0 Adrenals
 - .1 Androgens and anabolic congeners
- .2 Oestrogens
 - .3 Insulins and antidiabetic agents
 - .4 Anterior pituitary extracts
 - .5 Posterior pituitary extracts
 - .6 Progestogens
 - .7 Thyroid and thyroid derivatives
 - .8 Antithyroid agents
 - .9 Other hormones and synthetic substitutes
- N963 Adverse effect of primarily systemic agents
- .0 Antihistaminic and anti-emetic drugs
 - .1 Antineoplastic agents
 - .2 Acidifying agents
 - .3 Alkalizing agents
 - .4 Other electrolytic, caloric and water balance agents
 - .5 Enzymes
 - .6 Vitamins
 - .9 Systemic agents, not elsewhere classified
- N964 Adverse effect of agents primarily affecting blood constituents
- .0 Iron and its compounds
 - .1 Liver and liver extracts
 - .2 Anticoagulants
 - .3 Vitamin K products
 - .4 Other coagulants
 - .9 Other agents primarily affecting blood constituents
- N965 Adverse effect of analgesics and antipyretics
- .0 Opiates and synthetic analogs
 - .1 Salicylates and congeners
 - .2 Cinchophen and congeners
 - .3 Colchicine
 - .4 Aniline derivatives
 - .5 Other coal-tar derivatives
 - .9 Other analgesics and antipyretics
- N966 Adverse effect of anticonvulsants
- .0 Dione derivatives
 - .1 Hydantoin derivatives
 - .9 Other anticonvulsants
- N967 Adverse effect of other sedatives and hypnotics
- .0 Barbiturates
 - .1 Chloral hydrate
 - .2 Paraldehyde
 - .3 Bromides
 - .9 Other sedatives and hypnotics
- N968 Adverse effect of other central nervous system depressants
- .0 Central nervous system muscle relaxants
 - .1 Anaesthetic gases
 - .9 Other

- N969 Adverse effect of local anaesthetics
- N970 Adverse effect of psychotherapeutics
 - .0 Antidepressants
 - .1 Tranquilizers
 - .9 Other psychotherapeutic agents
- N971 Adverse effect of other central nervous system stimulants
- N972 Adverse effect of agents primarily affecting the autonomic nervous system
 - .0 Parasympathomimetics (cholinergics)
 - .1 Parasympatholytics (anticholinergics)
 - .2 Sympathomimetics (adrenergics)
 - .3 Autonomic nervous system relaxants
 - .9 Other
- N973 Adverse effect of agents primarily affecting cardiovascular system
 - .0 Cardiac depressants
 - .3 Cardiac tonics
 - .4 Cholesterol lowering agents
 - .5 Ganglionic blocking agents
 - .6 Vasodilators
 - .7 Other hypotensive agents
 - .8 Sclerosing agents
 - .9 Other
- N974 Adverse effect of drugs primarily affecting gastrointestinal system
 - .0 Antacids and antidiarrheal agents
 - .1 Intestinal irritant cathartics
 - .2 Emollient cathartics
 - .3 Saline cathartics
 - .4 Faecal softeners
 - .5 Other cathartics
 - .6 Emetics
 - .9 Other
- N975 Adverse effect of diuretics
 - .0 Mercurial diuretics
 - .1 Xanthine derivatives
 - .2 Carbonic acid anhydrase inhibitors
 - .3 Saluretics
 - .9 Other diuretic agents
- N976 Adverse effect of agents acting directly upon musculoskeletal system
 - .0 Oxytocics
 - .1 Spasmolytics
 - .2 Gold and its compounds
 - .9 Other
- N977 Adverse effect of other and unspecified drugs
 - .0 External medicinals, not elsewhere classified
- .1 Pharmaceutical dyes, not elsewhere classified
 .2 Diagnostic agents
 .8 Other specified drugs, not elsewhere classified
 .9 Drugs, unspecified
- N978 Adverse effect of two or more medicinal agents in specified combinations
 - .0 Opium derivatives with barbiturates or tranquilizers
 - .1 Salicylates with decongestants, antihistamines, etc.
 - .2 Barbiturates with salicylates or other non-addicting analgesics
 - .3 Non-barbiturate sedatives with salicylates or other non-addicting analgesics
 - .4 Psychopharmacologic agents with barbiturates
- N979 Alcohol in combination with specified medicinal agents
 - .0 Opium derivatives
 - .1 Barbiturates
 - .2 Non-barbiturate sedatives
 - .3 Antihistamines
 - .4 Psychopharmacologic agents
- Toxic effect of substances chiefly non-medicinal as to source (N980-N989)*
- N980 Toxic effect of alcohol
 - .0 Ethyl alcohol
 - .1 Methyl alcohol
 - .2 Isopropyl alcohol
 - .9 Other
- N981 Toxic effect of petroleum products
 - .0 Kerosene
 - .1 Gasoline
 - .2 Petroleum naphtha
 - .9 Other
- N982 Toxic effect of industrial solvents
 - Excludes petroleum products N981
 - .0 Benzine and homologues
 - .1 Carbon tetrachloride
 - .2 Carbon disulfide
 - .9 Other
- N983 Toxic effect of corrosive aromatics, acids and caustic alkalis
 - .0 Corrosive aromatics
 - .1 Acids
 - .2 Caustic alkalis
 - .9 Caustic NOS
- N984 Toxic effect of lead and its compounds (including fumes)

N985 Toxic effect of other metals chiefly non-medicinal as to source

- .0 Mercury and its compounds
- .1 Arsenic and its compounds
- .2 Manganese and its compounds
- .3 Beryllium and its compounds
- .9 Other

N986 Toxic effect of carbon monoxide

N987 Toxic effect of other gases, fumes or vapours

- .0 Liquefied petroleum gases (butane, propane)
- .1 Other hydrocarbon gas (methane, water-gas, acetylene)
- .2 Nitrogen dioxide
- .3 Sulfur dioxide
- .4 Frion
- .9 Other

N988 Toxic effect of noxious food-stuffs

- .0 Shellfish
- .1 Mushrooms
- .2 Other plants used as food
- .9 Other

N989 Toxic effect of other substances chiefly non-medicinal as to source

- .0 Cyanide (including gas)
- .1 Strychnine
- .2 Chlorinated pesticides
- .3 Other pesticides
- .4 Venom
- .5 Soaps and detergents
- .9 Other

OTHER ADVERSE EFFECTS (N990-N999)

N990 Effect of radiation

Excludes: dermatitis due to radiation (692.7)
sunburn (692.8)
burns (N940-N949)

- .0 Effect of radioactivity, neither diagnostic nor therapeutic
- .1 Adverse effect of diagnostic X-ray
- .2 Adverse effect of radioactive isotope or tracer substance
- .3 Other radiation
- .4 Adverse effect of radiotherapy, external
- .5 Adverse effect of radiotherapy, internal
- .6 Adverse effect of other radiotherapy
- .9 Unspecified radiation

N991 Effects of reduced temperature

- .0 Frostbite of face
- .1 Frostbite of hand
- .2 Frostbite of foot
- .3 Frostbite of other and unspecified sites
- .4 Immersion foot
- .9 Other

N992 Effects of heat

Excludes sunburn (692.8)

- .0 Heat stroke (heat pyrexia)
- .1 Heat syncope
- .2 Heat cramps
- .3 Heat exhaustion, anhydrous
- .4 Heat exhaustion, salt and/or water depletion
- .5 Heat exhaustion, NOS
- .6 Heat fatigue, transient
- .7 Heat oedema
- .9 Other heat effects

N993 Effects of air pressure

- .0 Barotrauma, otitic
- .1 Barotrauma, sinus
- .2 Other and unspecified effects of high altitude
- .3 Caisson disease

N994 Effects of exposure and deprivation

- .0 Effects of lightning
- .1 Drowning and non-fatal submersion
- .2 Effects of hunger
- .3 Effects of thirst
- .9 Other effects of exposure, not elsewhere classified

N995 Other general effects of external causes

- .0 Effects of excessive exertion
- .1 Motion (sea) sickness
- .2 Car and train sickness
- .3 Air sickness
- .4 Other motion (travel) sickness
- .5 Asphyxiation and strangulation
- .6 Electrocution and non-fatal effects of electric current
- .9 Other general effects of external causes not elsewhere classified

N996 Certain early complications of trauma

- .0 Air embolism
- .1 Fat embolism
- .2 Secondary and recurrent haemorrhage

- .3 Traumatic aneurysm and arterial injury
- .4 Nerve injury complicating bone injury (fracture)
- .5 Local infection of wound
- .6 "Shock"
- .7 Traumatic anuria (crush syndrome)
- .8 Volkmann's ischemic contracture
- .9 Other early complications of trauma

N997 Injury other and unspecified

- .0 Face and neck, except eyes
- .1 Trunk
- .2 Shoulder and upper arm
- .3 Elbow, forearm and wrist
- .4 Hand except finger(s)
- .5 Finger(s)
- .6 Hip and thigh
- .7 Knee, leg, ankle and foot
- .8 Other specified site, including multiple
- .9 Unspecified site

N998 Complications of surgical procedures

- .0 Reaction to lumbar or spinal puncture
- .1 Late amputation stump complication
- .2 Post-operative shock

- .3 Post-operative haemorrhage or haematoma
- .4 Accidental puncture or laceration
- .5 Disruption of operation wound
- .6 Foreign body inadvertently left in operation wound
- .7 Post-operative wound infection
- .8 Persistent post-operative fistula
- .9 Other complications of surgical procedures

N999 Other complications of medical care

- .0 Generalized vaccinia
- .1 Post-immunization encephalitis
- .2 Serum hepatitis
- .3 Other infection
- .4 Anaphylactic shock
- .5 Other serum reaction
- .6 ABO incompatibility reaction
- .7 Rh incompatibility reaction
- .8 Other transfusion reaction
- .9 Other

Excludes: contact dermatitis due to drugs

(692.3)

adverse effects due to drugs
(N960-N979)



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